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Business Magazine of the Medical Profession



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The Business Magazine of the Medical Profession

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The Local Application

BECAUSE the application of a hot Antiphlogistine dressing supplies continuous moist heat, and because of its high glycerine content and other synergistic agents, it has for its effect:

- 1. The relaxation of tissues, particularly of the muscle fibres;
- The production of an active hyperaemia, with resultant increased flow of lymph and of arterial circulation;
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- 4. A pronounced bactericidal effect on heat-sensitive organisms.

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Eighth and Quarter inch strips of BAYHESIVE are now available on the Bay "Freereeling" Container which is dustproof and unrolls like a reel. Your dealer has this convenient, practical, professional put-up for BAYHESIVE, the zinc oxide adhesive plaster which reaches maximum tenacity at hady temperature

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THE BAY COMPANY
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A DIVISION OF
PARKE, DAVIS & CO-

THE BAY COM	PANY,	Bridgeport, Conn.	ME :
Gentlemen:	Kindly	send sample of BAYHESIVE.	
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They stopped the mail to save a life

DECEMBER 23rd, 1931. One hundred thousand people in a Western city were mailing and receiving Christmas packages. Postal clerks worked frantically at their annual miracle—getting the mail through on time. Suddenly they stopped their systematic sorting. Let the mail pile up—dropped it and left it there while they set out to find one small package in four carloads just arrived from a distant city.

In all the mountains of Christmas packages that one alone held the promise of life for a certain young man with death at his bedside. It contained pneumococcic serum ordered by wire and mailed the day beforebut mislaid among the thousands of Yuletide remembrances. For three hours death stooped low over the sorting rooms while twelve veteran clerks went through a thousand cubic feet of packages one by one, found the precious serum in next to the last sack in the pile. Rushed it to the hospital in time to continue the battle for life that might otherwise have been lost by Christmas eve.

On land as well as sea the saving of human life takes precedence over all else. Yet a few years ago it would have been futile to search the mails for an antibody solution capable of holding pneumonia in check. But each year sees the physician better equipped with agents supplied by bacteriologists and chemists to help him combat the inroads of microorganisms. Among these is Zonite, that provides dependable germicidal action whenever it is required upon the skin or accessible membranes of the human body.

Zonite is a stabilized, mildly alkaline solution of sodium hypochlorite. It is rich in chlorine content and is actively bactericidal. It is non-hemolytic, non-coagulating and active even in the presence of organic matter.

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Zonite is electrolytically prepared to insure stability and does not low its chlorine strength. It is economical and always ready to use, requiring no preparation. Moreover it is valuable over a broad field and is really adaptable to a variety of techniques, meaning effectively every indication for its use.

Zonite fills every need that moden medicine imposes on an antiseptic, and the modern physician employs it with the confidence that it will not devitalize tissue or cause accidental poisoning. May we send you a bottle of Zonite and literature covering many of its uses? Zonite Product Corporation, Chrysler Building, New York, N. Y.

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If you use B-D Yale Syringes and B-D Needles you know there is a security about the combination that breeds assurance.

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Gentlemen: Kindly send me further information on B-D Yale Syringes and Needles.

Name

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Dealer's Name

BECTON, DICKINSON & CO., RUTHERFORD.

Speaking Frankly

TO THE EDITOR: Surgeon May I comment W.B.'s letter in December MEDICAL ECONOMICS? He took two patients to surgeons (who charged their regular fees whether they collected or not) while W.B. himself got nothing. He appears to think the surgeons are at fault. Why? The surgeon has his fee. If it is larger than the diagnostician's, is that the sur-geon's fault? The diagnostician fixes his own fee. He may undercharge for two reasons: fear of competition, or fear of offending his patient.

The answer to the first is medical organization, and the answer to the second is organized medi-cal publicity. Both have been admirably advocated by your jour-

nal.

The grave objection to feesplitting is the deception practised on the patient. If the financial arrangement is thoroughly understood by the patient, this objection disappears; but in that case why not charge an adequate fee for diagnosis in the first place?

Perhaps I should add that I do not practice and never have practiced as a surgeon.

J. Rosslyn Earp, M.D.

TO THE EDITOR: Specific cannot get any specific information "The Doctor and His Invest-ments." Merryle Stanley Rukeyser seems to fail to recognize that he is writing for medical minds and not financiers. He deals altogether in generalities and never gives specific information.

We cannot practice medicine that way. We have got to read the issue intelligently if we may expect to obtain satisfactory re-

J. L. Jennings, M.D.

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TO THE EDITOR: Perjury Dr. Fassett Ed. wards, in MEDICAL ECONOMICS for December, 1931, describes "a new kind of deadbeat," who succeeded in cheating a doctor out of one half of his fee, by mailing postal money orders for part payment of the fee to the doctor, receiving the doctor's receipt for the amount and then showing both, the postal money order stub and the separate receipts. Thus the swindler succeeded in "proving" that he had paid twice the amount which he really did pay the doctor.

It is deplorable that anyone will perjure himself in order to save paying his bills. Legally, it seems that the judge could not possibly find for the plaintiff doctor. America, apparently, is the only country where the practice of jurisprudence permits BOTH parties to an action at law, to take oath. In England and Germany, doubtless also in other countries, only one party is admitted to oath, as it is self-evident that both parties can not be Wm. Held, M.D. right.

TO THE EDITOR: Economy After reading the article, "Let us Cease to Pool Economy," by Fassett Edwards, M.D., I am impelled to write a short answer. Granting at once that there is a great deal of truth in what Dr. Fassett says, and that his article is timely and sensible, let us consider the matter a little more closely.

It is true, of course, that most of the slight ailments for which patients seek [TURN TO PAGE 133]

MEDICAL ECONOMICS

The Business Magazine of the Medical Profession

Office Control

By ROBERT RAY AURNER

Professor of Business Administration
University of Wisconsin

THE problem of efficiency in the doctor's office has thrust itself, during the past year or so, into a position of nothing less than eminence. As medical competition has increased and as resistance to medical collection procedure has stiffened, the problem of efficiency—even in the very simplest kind of terms—has become a headliner.

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It is entirely right that this should be so. It is indeed high time that the doctor should turn his analytic and diagnostic gaze squarely in the direction of the business end of his profession. For there, at this moment, the weakness lies.

Efficiency in the doctor's office, as far as the business end of the medical profession is concerned, is the product of three underlying factors:

I. Simple and Workable Methods of Bookkeeping.

II. A Simple and Workable Filing System.

III. A Knowledge of At Least the Rudiments of Medical Collection Procedure, Together with the Simple Principles of Psychology Involved.

In the light of these tests, not all physicians' offices are operating at efficiency. Some doctors know this. Others do not. Yet a successful practitioner today must, out of sheer necessity and strictly from the relentless pressure of competition, make himself into something of a business man. Or, failing that, he must at least realize the imperative need of having the business side of his practice handled by an able and competent executive secretary. Of the two courses, many doctors will prefer the latter.

Suppose we go behind the scenes for a few moments and look into this bookkeeping business. We will use only the simplest and commonplace terms. We will merely sidestep the lingo of the accountant and stick to unvarnished Anglo-Saxon.

Bookkeeping, reduced to its simplest definition, is simply a workable method for keeping track of income and outgo. You

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can call it "income-outgo control."

That is all there is to it. It supplies the information-and it should supply it in a form for quick reference—on what comes in, what goes out, and especially on what ought to come in, but hasn't! The essence of a successful system of bookkeeping is to keep it simple.

Now...a pause. At about this point in my manuscript I hear several doctors murmuring to themselves, "Oh, I leave all this bookkeeping business to the girl. It's a nuisance. I never have been able to get much of anywhere with it. She knows what to do, most of the time, so I just turn it over to her."

But can you afford, purely from the dollars-and-cents standpoint, to shelve the entire responsibility of managing the business end of your profession? Isn't there a possibility that there is enough of importance in this matter to deserve your thoroughgoing re-examination?

The answer is an unequivocal yes for those practitioners who have begun to feel the pressure of decreased returns on their efforts. There is waste going on

and uncertainty creeping in, and both the waste and the uncertainty are costly to the medical profession. Most of the waste and most of the uncertainty can be definitely localized in faulty re. cords.

From my experience in talking with doctors who have called me in to consult with them on the business aspect of their profession, this is what I have found to be the chief list of preventable

wastes:

- 1. Uncontrolled Income.
- 2. Uncontrolled Expenses.
- 3. Inaccurate, inaccessible, or inefficient records.
- 4. Professional uncertainty resulting from lack of clear records,
- 5. Over-elaborate and burdenbookkeeping some along the wrong lines, when effective simplicity would do as well.
 - 6. Unrecorded case histories,
 - 7. Failure to charge for ser-

Figure I: This is the simplest possible form of office record, giving the minimum information the doctor wants to know about his patient.

Dute	Service Rendered	Charge	Cash	Balance
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vices rendered—one of biggest financial leaks in the profession.

8. Statements too often tardy and delayed.

9. Poor collections.

No medical practice, however flourishing it may seem to be, can stand a chain of losses like this without feeling the results sooner or later!

And what of the uncertainty of faulty records? Not only is there professional uncertainty on the medical side, but there is likewise business uncertainty on the income-outgo side. The doctor, like every other citizen of the United States in comparable income brackets, is subject to an income tax. Its provisions call for a solemn declaration of a complete and true statement of the declarer's income, profits, and gains, together with a true statement of exemptions and deductions.

Figure II: This is the front of a more complete record form (the reverse side is shown on the next page). These forms were designed by the author.

According to figures of the American Medical Association, there are about 83,000 general practitioners in the United States. How many of these alone could turn out at this moment an accurate statement of their assets and liabilities? How many will be able to swear to the honesty of their entries when the next income tax report rolls around?

You are doubtless aware that Internal Revenue officers often find doctors' income tax reports singularly defective, and that they often find it necessary to cancel deductions because such deductions cannot be substantiated by accurate or available records. Some time ago I became curious to find out how important the Collector of the Internal Revenue of the United States Treasury Department considered this matter of assessing and collecting income taxes on doctors' incomes. So I wrote to find out the exact facts. A part of the reply follows:

"...it is recognized that no uniform method of accounting can be prescribed for all taxpayers, and the law contemplates that each taxpayer shall adopt

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SURGICAL PROCEDURE	
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SPECIAL NOTATIONS	

such forms and systems of accounting as are in his judgment best suited to this purpose. Each taxpayer who is subject to the Federal income tax law is required to make a return of his true income. He must, therefore, maintain such accounting records as will enable him to do so.

"Deductions taken by taxpayers upon their Federal income tax returns will be generally disallowed if not substantiated by

proper records."

The average office goes through several stages in the evolution of its office methods and in the keeping of its business records. The evolution is something on the fol-

lowing order:

The bound ruled notebook. Entries are made in chronological succession. There is no attempt to alphabetize entries. There is no question as to the simplicity of this method. But it is, taken alone, never adequate, even for the most modest practice. Next comes:

A day book and ledger. The day book, as the name indicates is for primary daily entries. The ledger is for the permanent transfer and posting of accounts. The column headings of each are

doubtless common knowledge to practically every doctor; but in the interests of making the evolution crystal-clear, let me indicate them thus:

The ledger column headings read as follows—(for the page heading) "Name......Address......
Telephone; (for the columns) "Date......Service Rendered.......
Charge.......Cash......Balance."

Normally the ledger is looseleaf. Examination will show that it is at least roughly alphabtized. Yet after a few years of hopelessly past-due accounts have fattened its thickness, there is no guarantee that the alphabetic order will be even rough. It must be acknowledged that the ledger is a cumbersome thing to handla. To make it perform its true functions, one must give it a good deal of nurs- [TURN TO PAGE 75]

Figure III: Reverse side of Figure II, shown on preceding page. All these forms are based on card measuring 4 inches deep by 6 inches long.

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IT'S A FIELD BELONGING TO MEDICINE

By Harold S. Stevens



N leaving Podiatry outside the pale of recognized specialties of medicine, the profession has committed, so far as its own economics are concerned, a major blunder.

The blunder represents another wide open gap in medicine's ser-

vice to the public.

A similar gap, until comparatively recent years, was proctology. Medicine suddenly woke up to ask itself, "Is there any reason why the diseases of the rectal region are entitled to less recognition than diseases of the eye, ear, nose, and throat?"

A pruritus ani patient can suffer as acutely as a patient with an ear-ache. Likewise, minor foot troubles contribute as much to worker inefficiency as sup-

purating tonsils.

Not only is medicine falling

down in service when it fails to recognize podiatry as a legitimate branch; it is also overlooking important economics.

Many a general practitioner now struggling along in a com-munity overrun with general practitioners would solve his financial problem, and at the same time fulfill a community need, by specializing in foot treatment.

An impromptu survey of podiatrists practicing in Greater New York indicates that their average income slightly shades that of

general practitioners.

Of the five thousand or so podiatrists now practicing in the United States, probably not more than twenty are licensed practitioners of medicine. A majority of the rest have never had scientific training. Obviously the field [TURN THE PAGE] is open.

The registered M.D. who recognizes this fact, takes the com-paratively small amount of training necessary to specialize, and confines his work to minor foot lesions, is in a position to profit by certain very definite advantages: as an M.D., his field would be far larger than what is legally permitted the usual podiatrist. If, for example, he recognized some local trouble to be secondary to a systemic disturbance, he could treat the patient constitutionally, whereas his competi-tor would be legally bound to refer such a patient to an authorized practitioner of medicine.

No question there are now great numbers of patients who object to carrying their foot troubles to the ordinary podiatrist, yet do not find the specialized interest they feel entitled to in the office of their family doctor. Such patients have, in fact, unconsciously anticipated the medical profession in recognizing the economic value of proper foot attention; they constitute an extremely desirable field for the medical foot-specialist.

There are today ten schools of podiatry in the United States. Six appear on the education roster of the National Association of Chiropodists as maintaining a proper standard. None is recognized by the A.M.A., because the A.M.A. does not recognize podia-

The course of study in each of the six institutions covers two sessions of eight months each. One school plans to extend this to three sessions. A single session, or even less, would be am-ple for a practitioner already trained in the basic sciences.

The practice of podiatry is on the way to becoming a professional entity, like dentistry. Either it will become that (in which case medicine will have bequeathed another portion of the human body to outsiders) or it will be taken in as a respectable branch of medicine. It will not stand still.

For this reason, podiatry rep. resents one of the most spectace. lar fields of opportunity since the beginning of specialism. The physician who goes along dissatisfied with general practice should open his eyes to that opportunity.

Here is what the head of one school of podiatry (he is an M.D.) says about it:

"The diagnosis and treatment of foot lesions, both major and minor, constitute a justifiable and legal avenue of application for any licensed physician in any state in the United States; hence the doctor of medicine who wishes to specialize in this field would simply have to brush up on his anatomy, physiology, bacteriology, histology, dermatology, and chemistry-serving on the staff of some podiatry clinic for the purpose of obtaining practical knowledge."

The text books in the field are: 1. "The Text Book of Chiropody" (Lewi).

Edition exhausted: published by The First Institute of Podistry, N. Y.
2. "Foot Orthopaedics" (Schus-

ter). Price \$8.00; published by "Foot Orthopedics", 55 East 124th St.,

3. "Practical Chiropody"

(Runting)

Price \$1.32; published in England, and obtainable from C. V

Mosby, St. Louis.
4. "The Practice of Podiatry,"

(Burnett-Gross).

Not completed. 5. "Surgery, as it relates to Podiatry," (Adams).

Price \$5; first edition exhausted; second edition in press; obtainable from The First Institute

of Podiatry, N. Y.
6. "Materia Medica and Podiatry Therapy," (Goldway).
Price \$5; in press; obtainable from The First Institute of Podiatry, N. Y.

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Washington Bicentennial Recalls Medical Heroes



1932



Solomon Drowne, M.D.



Joseph Warren, M.D.

The United States this year celebrates the 200th Anniversary of Washington's birthday. Many were the physician-heroes who joined with Washington in winning America her independence. Dr. Joseph Warren was major-general in command at the famous Battle of Bunker Hill. Dr. Solomon Drowne was one of the first doctors to join the army of the Revolution. Dr. John Archer raised a company of soldiers and served as major. Dr. Jonas Fay headed a company of Vermont "Green Mountain Boys." Dr. Benjamin Rush was a signer of the Declaration of Independence. Dr. William Aspinwall fought at the Battle of Lexington.

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A GREAT and grand indoor sport in this Year of Grace 1932 has for its fascinating name "Looking at Doctors." The players of this diversion have pens in hand or typewriters on knees, with which to record their observations. The results are broad-

cast.

The game was invented two or three years ago when a "layman looked at doctors." Since then numerous other laymen and laywomen have stood before the microphone and rushed into print to tell the rest of the people what wonderful scenes they beheld when looking at general practitioners, specialists of all classes, nurses, hospital orderlies, office assistants, chauffeurs, and everybody else and everything else connected, even in remote degree, with the little band of men and women who are trying to justify their discipleship in the Order of Esculapius.

As a doctor who has been peeped at from various angles, professional, financial, civic, political, and even domestic, I am getting fed up on being on exhibition. I suppose that so long as we serve the public, the latter are entitled to look us over as

much as they please.

But there are others who also serve the people, or claim to do so, and I submit that in all fairness to the medical profession, some of these others should be subjected to at least a modicum of scrutiny. I use that limitation advisedly for that is about all they can stand.

I propose taking a look at the lawyers. Of course it may not be a pleasing prospect. Everyone can call to mind more harmonious settings, more inviting scenic attractions, and more brilliance of color, than can be found in a bunch of lawyers. However, the lawyers are in our midst, so we might as well look them over. This would be quite unnecessary if our forefathers had taken the advice of Mr. William Shakespeare who counseled "The first thing to do, let's kill all the law-yers." Unfortunately the breed was not exterminated; and lawyers have multiplied as rapidly as taxicabs.

What do our eyes first fasten on when we gaze at lawyers? Is it their personal appearance, their attire, their bookish air, or the musty tomes with which they are wont to sit surrounded? It is none of these. It is the dollar mark! And some of this trib have had the consummate nerve to look.at the modest fees of doctors and proclaim to the world that doctors are overcharging.

The lawyer in general practice may be thought fairly comparable with the general practitioner of medicine. Certainly this is not so in the matter of charges for service. The medical man gets two, three, or maybe five dollars, for a visit to his patient's home. That is, he gets it if he collects when the bill is rendered. The attorney sits in his office and his client comes to him and general.

18

AS TOLD TO FREDERICK A. FENNING

ly pays the fee before he can get back into the fresh air. Sometimes it happens that the fee shock necessitates the client going straight to a heart specialist, which is some help to the medical fraternity, though it is added expense to the client-patient.

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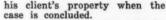
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Recently at my club, one of the men in our group advised another to consult a lawyer. The man to whom the suggestion was made at once put on a "spinach face." This contortion of the facial muscles is familiar to physicians, but never before had I seen it except on patients who had just been advised to eat spinach. This was a good indication of the way laymen look at lawyers—just as so much spinach.

Look at the ease with which the lawyers collect fees for which they have to bring suit. First, however, we must remember that such instances are relatively few, for a lawyer gets a retainer when he starts work, an encourager when he gets under way, a trial fee as the case goes to trial, a booster when the time arrives for a speech to the jury, and half of



If a lawyer sues for a fee he has no payment to make for counsel services, he has the brotherly sympathy of the judge who used to practice law, and when he gets judgment he knows exactly what property the defendant has that is subject to attachment and can be made to satisfy the judgment.

When a doctor sues he has to hire an attorney, and submit the reasonableness of the claim to a jury of men and women who know nothing whatever of the value of professional service but have no hesitation in deciding that the doctor is asking too much. Any judgment that the doctor may get is likely to be an expensive luxury unless he can find a way to make the defendant

Cast your optics on lawyers when they are considering serious problems, and then look at surgeons preparing for an operation. Yes, and do not overlook the results to clients and patients.

The surgeon studies the physical condition of the particular individual on whom he is to operate. Then he aims to use the most approved technique, he insists on the latest methods of sterilization of appliances, and his safeguards against infection are those of 1932. Given a Chinaman's chance, the patient recovers.

The lawyer starts with Volume 1 of the Supreme Court reports and works backward through the Code Napoleon, Coke and Chitty and Black- [TURN TO PAGE 103]



Give the Patient

IF YOU DISAGREE DO IT WITH TACT

By Victor R. Small, M. D.

NE of my patients is a woman who, at every visit, invites attention to the fact that she cannot take Aspirin. years ago she discovered that it "affected her heart." She was at that time being treated in a sanitorium of questionable ethi-cal repute, and a physician there confirmed her fear in regard to this drug, and advised her to take Acetyl Salicylic Acid in-Consequently she always gets the drug prescribed for her under this latter name.

The deception was a smart trick on the part of some doctor but it has caused no definite harm, and she has accepted it as an axiom for future therapeutic guidance. An exposition of the deception, at this late date, would serve no other purpose than to humiliate the patient.

The attainment of success in the practice of medicine requires, on the part of the physician, scientific knowledge and skill. It is also essential that he possess a knowledge of human nature, and that he exercise tact in dealing with his patients and with the patients' friends. This is an old truism, but fortunate is the physician who, early in his career, learns the truth of this assertion and then lays the foundation for his medical work accordingly.

The scientific phase of practice of medicine is taughtand taught well-in our medical Hay schools, but little or no attention is is given to the equally impor- whe tant personal contact phase. This is left for the physician to learn it in office and sick room. Learn it kno he does, sooner or later, but often at a tremendous cost!

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Laymen will seldom question a physician's skill or scientific knowledge. As a rule they will accept his diploma and medical license certificate at face value. In fact it is extremely seldom that a layman is ever heard to remark that, in his opinion, Doctor A "is not well read" or "does not know his stuff." If the doctor is spoken of disparagingly, it is because the person so speaking has some personal dislike for that particular physician, and nine times out of ten, this dis-like is founded on some unguarded expression or untactful act of the doctor.

practice of medicine, the physician's judicious employment of tact is as important as some the employment of his scientific swol skill—often it is decidedly more to p
important—and to employ tact it
is necessary that the doctor be chit
a student of human nature, both
xiou
in the aggregate and in the indi-

He must know something of ceed the workings of the "mass mind," their and he must also know the per will sonal likes, aversions and pecustarities of his patient, and of the know patient's relatives and friends good



ant as some kind friend has covered the swollen ankle with a raw potates with a raw potate to poultice, or when he visits litter to be the control of the chitis, and finds that Willie's antended in the chitis and the chitis, and finds that Willie's antended in the chitis and the chitis and

"S A L T S!" he thundered, "I WON'T TAKE A DOSE OF SALTS FOR ANY MAN LIV-ING!"

He took his salts.

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By H. G. BULL, M. D.

N the twenty years since I graduated from medical college I have assisted many candidates for operation to stem the murky waters of Lethe. But the occasion had never arisen for me to take a general anesthetic myself.

There is no doubt that a doctor, ill, derives a great deal from illness that has educational value. Certainly, he is in a better position to get the viewpoint of his patients if he, himself, has been through some of their experi-

ences.

He can appreciate and thus emphasize the comfort derived from certain nursing measures. If he carries to his own sick-bed a little of the ability to observe that he is supposed to possess, it is not long before he has acquired rather definite opinions as to which of several drugs or nursing measures may be most helpful in this or that condition; and after all, the aim of doctors, nurses and hospitals is to make illness as comfortable as possible for the poor souls upon whom it is visited.

So it was with open arms that I welcomed the prospect of a general anesthesia, necessitated by an operation upon one of my knees. It is my sensations as I went under, and later emerged, that I am here attempting to record. Having fainted away on several occasions in years gone by-and fainting being an ex-perience common to so many of us-I have that much of an armamentarium with which to begin; but some of my sensations were so bizarre, so utterly foreign to anything in my previous consciousness, that I have difficulty in finding terms that will describe them.

I had no preliminary hypos, as are usually given, so my ensuing experiences cannot be accredited in part to morphine, but solely to the action of nitrous-oxide and ether in the abolishing of consciousness. Nor was I strapped to the operating table: I simply slid my hands underneath my hips and promised to be good A nurse was holding high my left foot while another was sterilizing the operative area at the knee.

I was all agog to see what I should see, when I was conscious of a very pleasant sweetish smell in the mask which bound my face

and jaws.

"Is that gas?" I asked in amazement, for I had considered it as being mildly disagreeable. Yet this, in reality, was rather pleasant.

"I don't see," I remarked to the anesthetist, "why anybody should object to taking this; isn't at all bad"-and then anoth-

er long breath.

"The feeling is identical with fainting"-I thought-"exactly

the same!"

My foot, now as if completely isolated from the rest of me, could still feel being held in a by my nurse; with each inhals tion I could feel myself becoming rapidly vaporized; it seemed that all the substance that had bee

A DOCTOR INTROSPECTS ANESTHESIA

my body was being, at each breath, replaced by millions of little atoms of mist.

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I experienced no loud noises. no bright lights, no dreamssimply a complete vaporizing of myself-and in the pleasantest

With the last long breath that carried me over the bay (I think it was the fourth) I thought, "Well, this is the last one, and I may not come out of it; you never can tell. (And then absurdly)-"if I don't, I never can tell them how it felt, and I will never be able to tell them that my last thought was that if I never came out of it I could never tell them how it felt..."
Then fell the curtain.

One day my two little girls were playing "tonsil operation." The "patient" was duly wrapped in a sheet and her head bound with a towel. Then the "doctor" held something before her face,



whereupon she went to sleep. After a few seconds the "doctor" removed the towel from the "patient's" face and the operation was over!

"But." I had remonstrated. "you have not removed her tonsils; you did not even open her mouth!"

Whereupon I received the astonishing assurance: "Why, yes, I did, that is all there is to it!"

Then I realized that all they remembered was the preparation, and the beginning of the anesthetic! And so it was with me. Were I to describe my operation (and what a popular pastime it is!) I could do no more than the two little girls playing "tonsils"; and if Dreamland lies only in the Borderland of Consciousness, mine must be a very narrow strip of terrain, for I had absolutely no dreams whatever.

When Virgil wrote that the descent into Avernus was easy, but that to retrace one's steps and find the way back—"Hic labor, hic opus est"—he might have been thinking about anesthesia. In describing the beginning of my experience I am describing the effect of the nitrous-oxide alone; ether was added after I became unconscious; the recovery should involve a more complex experience-and it did.

My first sensation stood out like a solitary rock of consciousness in a sea of oblivion, for nothing was registered for some time before or after it. I recall feeling that I was like a volcano -all strain- [TURN TO PAGE 113]



"As I progressed, I began to realize the terrible mistake I had made in my first five years of practice I discovered that there was nothing unprofessional in friendliness. . . .

ASecond

BUT IT MAY MEAN

DO not profess to know what is responsible for the shifting ideas of doctors on the subject of locations.

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"I will stay here five years, and then move to the city," says the beginning country practitioner.

"I will locate here, permanently, and build a practice that will grow with the community," says another.

Twenty-five years later the former may be the medical mainstay of the little community he foreswore to abandon in five years, while the man who located "permanently" long since responded to the urge that seems to overtake so many professionals to move from where they are to where they think they should be.

cate, This migrating urge is by no means confined to the country physic not ye doctor. Nor is it always actuated by failure in the location initially story. selected. Some men are by nature adventurous spirits. They respond to the call of mountains or seashore, or to the attractions of suburi new countries with colorful fu-about tures forecast for them. I know "and is a doctor who practiced for fiftee tions a doctor who practiced for fifteen years in a thriving mid-western trity, and who, without any reason discoverable to his friends, suddiscoverable to his friends, suddenly decided he wanted to lim tors. I further west, selecting a city in located Montana where he was entirely and the month of act, successful in both places conduct Another of my acquaintants ironm moved from Illinois, where he was very successful, to Oregon to avowhere he failed to get on. The cared story of these two men, one who ional succeeded and one who failed there might be interesting, but it would be not help to enlighten the doctor mulat

Start . to Success

(HANGE OF PACE . By Hall Johnston

who feels now that he must change locations. There is too much difference in men-in these two men and in him-to make and their experiences instructive.
The man who thinks of char

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The man who thinks of changing locations faces many problems, and in their solution may will depend success or failure. Luck plays a very large part, just as it does in the business game.

In the story I am about to relate, which concerns the experiy he ence of a physician who tried es-five tablishing a practice in two com-munities of very similar charac-retristics, luck doubtless had its influence. I believe, however, that ence of a physician who tried esonals the manner in which he attacked re to his problems may not only help d be the man who thinks he must relo-y no cate, but also may interest any intry physician, anywhere, who may lated not yet be fully established. We cially will let this doctor tell his own ature story.

"I first located in a prosperous suburban section of a city of a suburban section." I think conditions were favorable. The community, although already well espaces but badly overcrowded with doclive tors. I set up a modest office, and the suburban of the tand prominent. I had observed many e h types of doctors, and determined egos, to avoid certain things that appeared to me as errors in professible with the standard conduct, and to adopt alled there that appeared desirable.

Would "I particularly wanted to avoid doctor mulating a certain type which

was fixed in my mind as one with an over-friendly, blustering attitude toward the public generally, and a far too intimate manner in dealing with patients. As a boy I had known a doctor who pinched the cheeks and patted the heads of all the children in the family, and who, while making a professional call, always inquired about the health of everyone, including the family cat and the neighbor's dog. He talked about everything and everybody. It looked to me like a good deal of it should be labeled advertising.

"As I say, I wanted to avoid any appearance of such conduct. I felt that it was up to me to maintain the dignity of my profession. At that, I was by nature a friendly person, and it may be that I had some fear of becoming just the type of doctor I was anxious to avoid being. At any rate, I carefully assumed a reserved, and what I thought to be a dignified attitude toward my new public, and I guess I went about most of the time with a rather serious expression on my face. I stayed close to my office, studied, treated my patients with dignified courtesy, and refrained from being very demonstrably friendly.

"The plan seemed to be rather successful. For a time I felt well satisfied. Af- [TURN TO PAGE 113]

. . . . no longer have any false notions about dignity and professionalism. I am genuine, real, natural. I am just myself, giving at all times the best I have."

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THE campaign to raise a fund for the assistance of Sir Ronald Ross, whose discovery of the dissemination of malaria is one of the epics of medicine, makes a steady progress across the country. Physicians know better than others what the need for this assistance may be. Sir Ronald's declining years find him an invalid, paralyzed. He is in need.

People are fond of speaking of the fine tradition of the Thespian profession—the unwritten law which binds an actor to help a brother actor in distress. The same tradition, though perhaps less widely recognized by the public, attaches to the medical profession. The physician aids his brother physician in distress.

So this call will not go unheeded. The magnitude of the campaign makes the demand upon individual generosity exceedingly small. Quarter-dollars, half-dollars, and dollar bills are the commonest donations.

This is a tiny cost to pay to uphold a fine tradition—to help make supportable the final days of a life which has itself contributed so much to medicine. Send your coins, your dollar bills, your checks, to the secretary of the Fund, Dr. Robert L. Pitfield, 5211 Wayne Ave., Philadelphia, Pa.

It is only too true that the case of Sir Ronald Ross is no exception. Sad to say, there is a long list of men who have done noble service to the world through medical discoveries, only to realize that gratitude is short-lived. The names of Semmelweis and Roentgen are two names which come to mind instantly as two great contributors to the benefit of mankind, who found themselves in

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need during their last days on this sphere.

To whom is the blame? Certainly not to these worthy men. Centuries of tradition (and indeed apart from tradition, their own temperament) made them scornful of self-profit from their discoveries. It is easy to say, "The world is to blame for failing to appreciate their efforts by a substantial reward"—but that does not prevent a repetition of such misfortune.

The ultimate blame, of course, rests with the medical profession itself for its ineffective economic organization.

Organized medicine may boast of many accomplishments: its interchange of scientific thought, its guardianship of professional morals, its holy watchfulness over the practitioner's armamentarium. But its watchfulness over the welfare of its own—its Sir Ronald Rosses, its Semmelweises and Roentgens—is a shameful thing.

Most shameful of all is the fact that organized medicine has allowed the two-edged sword of Misdirected Philanthropy to wield its way without resistance. If the billions of dollars now spent on bigger and better white temples of health (in which, incidentally, no one serves free but the doctor) were in part directed toward the establishment of trust funds to insure our most brilliant workers a few declining years of ease, we could rightly carry our heads high.

The doctors of the United States are glad to be able to help their worthy comrade in distress. The sad part is that it had to happen at all.

K Sheridan Baketel

Wastebasket

HOW I SORT MY MAIL



"It takes study to separate the wheat from the chaff. We cannot do without a capacious wastebasket; I work mine overtime occasionally, but nothing goes into that wastebasket until it has run the gauntlet of swift, searching scrutiny."

S OME months ago I happened to be visiting a widely known surgical supply house to examine some newly developed surgical instruments, when one of the firm called me over and handed me a letter to read.

"What do you think of that, Doctor?" The letter in question was a rather pompously written effusion from some newly born clinic in the Far West and was signed by an Unknown who styled himself Chief of Staff. In rather severe tones he admonished this long-established surgical house for its temerity in mailing "the clinic" circular matter describing new surgical instruments and supplies.

"The Clinic" wanted it to be distinctly understood that all advertising matter was routinely consigned to the wastebasket unopened; they played no favorites and the edict applied to everything but first class mail matter. Some of this latter might perchance contain a check now and then, so it was good business to waste enough clinic time to open it—but thumbs down on all else coming through the mails!

The surgical house executive had asked me what I thought of that. "Damphools" seemed to cover the situation precisely. Was I duly impressed with the pompous wording of this clinic letter? I was not. Most emphatically not. Depressed is the word. Depressed at the thought that fellow medical men, perhaps progressive in all strictly medical and surgical matters, were so unseeing, so utterly thoughtless, as not to realize that in all the advertising

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By J. B. H. Waring, M. D.

chaff that comes to the average physician's desk, there are many grains of knowledge; much pure wheat in the way of latest medical and surgical knowledge.

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Assuming that we have been graduated from medical school, interned, State licensed, and our brass "M.D." sign all paid for and mounted before our suite of offices (said suite in the old days often consisting in rental of the front parlour and back sitting room from some family in moderate circumstances) and ready to turn an honest penny.

If we happened to be born with "selling" ability, we need no instruction along those lines. As the duck takes to Aqua, so the naturally gifted M.D. rapidly acquires "a practice", seemingly without effort. The rest of us (most of us, in fact) have to work long and hard to acquire that elusive practice. We know we are good; we frankly admit it, but how are we going to ethically impress that fact upon a reluctant, stand-back public?

The proposition is simply this: if we do not have the inherent "selling" gift, the only way to acquire it is by study; long, hard study and close observation of the "selling" efforts of the successful people we come in contact with.

Now take the average doctor's mail. Bills, plenty of bills, often with a generous sprinkling of "Please Remits", "Past Dues", and "Your attention is respectfully invited." Once in a long while a small check. The bulk of



our mail usually consists of circulars and samples on this and that new medicinal product, or newer and better surgical instruments—perhaps the latest X-ray or electrical outfit. Then again someone wants to sell us stock in the Death Valley Macaroni Company, Ltd.; or they want to tell us what bonds to buy; or what insurance we should have; or all about Sun-Bright Paints; or the patented Workless Floor Mop that every woman wants.

All right. Admitted that a lot of this circular material is worthless from our standpoint, that it is a waste of time even to open it, and that it should be filed in the wastebasket on sight. Yet here and [TURN TO PAGE 125]

Everybody's Business

FLOYD **PARSONS**

HE pessimists declare that recent changes have been for the worse, that the "good old days" are past. They say that yesterday the stock market was patronized by comparatively few. Yesterday's recreations strengthened the muscles rather than stimulated the nerves. Family life was supreme. Parties and dances were given mostly in private homes. Morals were better. Smuttiness on the stage was hissed by the audience.

People lived in individual houses and had privacy. In the absence of speedy vehicles of transportation, social life was essentially a neighborhood affair. No canned music being available, the individual had to play for himself, and this cultivated talent and fostered self-expression. There was repose instead of restlessness and a complete absence of the present terrific urge to meet rising standards of living.

The majority of investments were reasonably safe. Jobs were comparatively free from the threats now created by a multitude of new discoveries. Not even grownups, let alone children, felt the need for constant thrills. Very little effort was devoted to manufacturing useless things. High-powered salesmanship was not employed to induce people to buy silly and imperfect products. There were no costly cam-paigns of publicity to force public acceptance of unwise policies and programs.

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Installment purchase plans and other forms of easy credit had not been devised to persuade con-sumers to buy. The present great army of clever designers and fashion research experts had not yet been developed to bring about unending changes in styles so the public would prematurely discard the old and buy the new.

Such are the criticisms set forth as an indictment of present conditions. They not only have considerable justification, but might be largely extended. One could add that recent changes in our conception of dishonesty have not improved the situation.

The rules of fair play in the financial game have come to be no more observed than would be the case outs we if one card player knew the order of the cards, while his opponent did not. Thousands of Americans put their money into enterprises of which they knew little—because the idea of investment was associated in their minds with early traditions of prudence and confidence. Even the financial statements of corporations have come to be of small value to



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SET A COURSE, BUT WHERE?

The nation must discover a large number of totally ew industries, not competitive with older lines of nterprise."

hidden utsiders unaware of

But not even our glaring defiiencies and the miseries of wrldwide depression should be llowed to blind us to the amazng progress of America and the remendous opportunities that lie head. Yesterday may have had s advantages, but there was no echanical refrigeration. Butchring had to be done in cold eather. Off-condition food prodcts were accepted as a matter f course. A loss of 10 to 20% in erishable commodities was conidered inevitable.

There were no automobiles, lovies, radios, or a hundred other nts hings in common now to dousehold furnishings and appliances had remained unaltered for years. Epidemics swept the larger cities. Streams and streets polluted were with sewer-Medicine age. and surgery were crude. The "Pony Express" was the chief means of travel between the East and West. Stamina, rather than comfort, was the of the manufacturof vehicles.

Years passed, and electricity was ushered in to revolutionize habits and practices. The introduction of the elevator brought along the skyscraper. Radio made the world a "Main Street." The old yardsticks used in measuring business activity became misleading, if not altogether worthless. The figures showing freight-car loadings, activity of bank checks, workers employed and factory production became inadequate They left out of and deceptive. consideration such things as the performances of motor trucks, pipe systems, high-pressure electric transmission lines, transfers from one bank account to another, and the increase in substitute products. TURN THE PAGE National business leaders were overwhelmed by the rapidity of change and became confused. Economists floundered and statesmen disclosed inability to create plans for the future guidance of

trade and industry.

But human ingenuity and scientific resourcefulness were never more active than right now. At no previous time have there been so many new industries and new arts in the process of incubating, nor such a great number of new ideas in the course of development. All about us new inventions are "popping." Hardpressed corporation managements are improving practices and cutting costs.

No one is wise enough to foresee the importance of many problems up for solution. Not even the research worker himself can fully visualize the ultimate ef-fects of his latest discovery. Faraday never dreamed that his electro-magnetic work such important results. Similarly today we lack all conception of many vital changes close at hand. But there are facts before us which may be used to draw conclusions concerning the outcome various of current trends.

In the field of finance we may be sure there will be fundamental reform of present banking laws. The savings of the public will be better safeguarded, probably even guaranteed. The limits on postal savings will doubtless be raised from \$2,500 to \$5,000, and since the government puts this money back on deposit in the banks, here is provided one method of having the government guarantee deposits.

The general trend will be toward tax changes that will more largely "tax the rich." Recent decisions of the Interstate Commerce Commission indicate plainly that strong individuals and corporations in the future will be required to help the weak. The tendency will be more and more for the law of Demand and Supply to take the place of the law of Supply and Demand. This means that consumption will be primary and production secondary, reversing the policy of recent years.

We will abandon the notion that all parts of the railroad plant must be operated in intense competition with all other parts. Every country but the United States has dethroned the fetish of unrestrained competition in transportation. Remarks of federal commissioners contain a hint that we also must change.

The composite index of commodity prices will tend to flatten out. Advances will largely offset declines until eventually basic necessities will reach a better

state of balance.

Just ahead of us are definite forms of business control operating under the authority of a super-council. Considerable progress will be made in regulating national developments and allotting production quotas to the various industries.

For some years to come business will be governed largely by caution and vigilance. Such factors as obsolescence, unexpected change, and incompetent management will be carefully studied and appraised. It will be recognized that industries rise, grow, flourish and die; nothing "stays put for very long; nature is always at work with "red ink," days, nights and Sundays.

If we are to continue to enjoy
the same rate of growth that has
prevailed in our country and at
the same time create large capital
reserves for insurance of various
kinds, unemployment and old age,
as well as life, the nation must
discover a large number of totally
new industries, a great many of
which must not be competition
with older lines of enterprise
Only in this way will capital to
able to increase without damage
to existing capital.

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"SKIPS," so-called by credit men, are those people who run up a lot of debts and then go away, leaving nothing behind but the unpaid bills and their names over the doorbell. Up to now, it has been impossible to trace them except by trickery (such as sending a vague notice having to do with a will, or a "package awaiting shipment," or anything which induces the debtor to show himself).

Postmasters have not been permitted to divulge a forwarding address. Congress has improved this situation by a recent act, authorizing the Post Office department to trace a "skip" for a

fee of 23 cents.

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The procedure allowed by the act is simple. Send a registered letter to the last known address of the debtor, marking the envelope "Return receipt requested showing address where delivered." If the letter reaches its destination (and it usually does) the post office department mails a receipt back to the sender—and there is the new address!

Militant action, so much used in other fields for accomplishing purposes, is slowly but surely becoming a weapon in the health field. The physicians' strike in France a few years ago was an outstanding example. Last month student nurses in the Wichita Hospital, Wichita, Kansas, walked out in protest against the board's decision to discontinue their monthly allowance.

Business men who read Nation's Business are having their weaknesses pointed out to them in a series called "Gallery of Popular Fallacies." Ideas like "A Dollar's a Dollar" and "It is

Cheaper to Rent Than to Own a Home," are knocked over. Among the fallacies for De-

cember was this one:

"I DON'T NEED A DOCTOR, I'VE NEVER BEEN SICK."

It was contributed by the Wayne County Medical Society, Detroit.

When the house owners in Milwaukee get their water bills this month, they will see this note printed in the corner:

"HOW IS YOUR HEALTH? Many serious diseases show no symptoms at their onset. They can be detected only by means of a complete medical examination. Most of them can be cured, and all of them improved through early treatment."

Another instance of municipal cooperation with the private doctor.

Too many doctors? Supposing there are, what is there to do about it? Mexico provides an answer. The San Luis Potosi state legislature has passed a law suspending all courses in medicine within the state for a period of five years—thus temporarily shutting off the supply of newcomers, and giving the older physicians an opportunity to earn their stipend. Here is one example of intelligent cooperation between the law makers and professional men, and it comes from Mexico!

Two more medical societies about to emerge from the chrysalis of silence and undertake publicity campaigns, are the Maricopa County (Arizona) Medical Society, and the Honolulu Medical Society. Both are getting cooperation from the local newspapers in working out a program.

Apparently Well and Growing —yet Calcium-poor*



THE clinical experience of almost every child specialist includes cases wherein the patient appeared to be in sound bodily health, and normally growing, and yet was receiving insufficient amounts of calcium—so greatly needed for bone-building.

Klim Powdered Whole Milk provides an easy way to combat this condition. For Klim contains 0.96 percent. available calcium, or eight times as much of this essential mineral as is found in fluid milk, long recognized as the optimal source of this nutritional requisite.

By adding Klim in powdered form to children's recipes, you can help to assure an abundant supply of this important substance in its most assimilable condition.

For the convenience of physicians, the Merrell-Soule Division of The Borden Company has prepared a useful pamphlet containing children's recipes reinforced with powdered whole milk. It will be sent on request.

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*"... it is plain that the valcium-poor condition of body in children may coexist throughout much or all of the period of growth with normal increases of height and weight and with every appearance of good health as indicated by physical examination."

Sherman and Booher. Journal of Biological Chemistry. September, 1931, page 103.

Avoid calcium deficiency by using Klim. In addition to this mineral, it increases the vitamins, fat, carbohydrate, and protein of ordinary diets.

MERRELL-SOULE DIVISION

The Borden Company

Dept. ME, 350 Madison Avenue, New York, N. Y.



POWDERED WHOLE MILK



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Taking History in the Health Exam

By C. WARD CRAMPTON, M. D.

THE man you are examining has a history. He may be thirty years old, but, in a sense, as Dr. Charles B. Davenport has said, "He is thirty thousand years old," and more. Part of this history we are accustomed to take for granted; much more we instinctively infer, but some of it must be made the subject of inquiry. If we knew it better, the medical management of could be more effective.

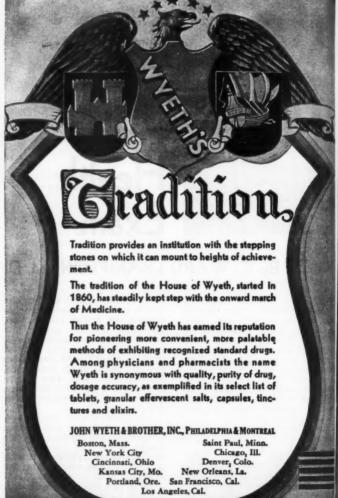
How should the history be

taken?

An excellent way is based on the doing of the health examination in two visits, a practice which has many advantages. On the first visit, which may be a brief one, the health client is given a history blank to take home and fill out. This blank is designed not only to get information; it can suggest good habits and it can give information concerning the health examination. This will save the asking and answering of many questions, will economize time and may serve to turn the client's mind away from anxiety, and towards confidence, security and health. This matter of attitude is the most important essential in the whole health examination.

The client returns for his second visit with his contribution to the history completed, but this record is not full history until the examiner supplements it with pertinent and necessary data; for example, the client reports "head-aches." The physician will wish to know location, duration, time, quality, relationships, etc. No history can be completed by client, nurse or assistant.

The history is divided as follows:



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1. Heredity.

2. Previous illnesses and immunization.

3. Previous and present methods of life management, regime and environment.

4. Present complaints.

1. Heredity:

The question, "Do you believe in heredity?", is not debatable, among the well informed. Heredity determines the number of arms, fingers and kidneys, the kind, arrangement and quality of all organs, and all the cells of the body. It exerts a large influence on the events of life and the nature of disease, recovery and death. Much is known about heredity, but much more is in process of assay, and more, no doubt, remains as yet unguessed. As a practical measure we inquire as to the following:

(1) Neuroses: Hysteria, etc. (2) Nervous diseases: Muscular dystrophies, etc. (3) Constitutional diseases: Diabetes, etc. (4) Allergies: Asthma, etc. (5) Circulatory: Myocarditis, etc. (6) Unclassified: Jaundice, etc.

2. Previous illness:

Every illness results in victory, death or armistice. If the victory rests with the man, he may be immune from further attack, he may be damaged and weak and subject to other illnesses, or the disease may remain entrenched for a period of uneasy and

dangerous truce.

Illnesses recur in their own form or forms, or as other diseases. There is a great group of diseases and disabilities caused by the staphylococcus. These are often seemingly unrelated, but in reality they are one disease, occurring at various times of life in various places, such as the skin, sinuses, tonsils, bronchi and kidneys, while their toxins range further. The streptococcus is even more versatile and protean, while tuberculosis and syphilis are no-

torious for their lifelong infestations. They can often be discerned in "Previous History."

3. Life habits and environment:

It is easy to neglect the undramatic, but one cannot escape the effect of a wrong way of living. Exercise or the lack of it. diet, sleep, rest, work, play, sex affairs, worship are the usual categories. Environment means much to the man who has lived in a malarial region, or in a streptococcus or tuberculosis infected family, and his present surroundings are of definite import. It is the search for these facts and their significance that makes the health examination laborious. It is skill and understanding in this field that makes greatly for success.

4. Present complaints:

While the search in heredity, previous illnesses and regime is like the exploration of a diversified terrain in search of signs of valuable mineral, the consideration of present complaints is out in the open like a fox hunt, with the quarry in full view and the hounds at his heels. The chase is not always an easy one, but it is always dramatic, eventful and interesting. This field has been well covered by others. But it is well to note the fact that this is the field of pathology, and yet it is essential to the health examination.

All that the writer has attempted to do is to present a topical resumé of the subject of history taking in the health examination. The health examination will vary in length, scope, purpose and content, according to circumstances. The history taking will, in practice, similarly vary, but it will always repay the ef-

fort expended upon it.

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THIS DOCTOR'S WIFE" GETS SOME COMEBACKS

THE long, sad, and almost unbelievable story—"When His Patients Call Him, He Goes" calls forth a great deal of sympathy for its author. can still smile in the face of such conditions is beyond my comprehension.

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I am quite pleased to be able to correct the author's impression that all Doctor-Husbands are as "ethical" as her husband. Do I treat my wife and family when they are ill? Certainly! Would I treat my wife through an attack of pneumonia or be her accoucheur? Certainly not! Ethics?-ROT! Certainly to my mind the average medical man would not have the ease and freedom of thought necessary to treat intelligently one of his family under such circumstances.

But that doesn't stop me from prescribing for the many lesser ills which they fall heir to, and I certainly think that I am capable enough to know when outside aid is needed-even if it should be only moral support.

I have been practicing nine years and married an equal number of years. In that time I have come to know quite a few "Disciples" and I don't believe there is one of the lot who would refuse to prescribe for his wife's headache-even the layman would give her an aspirin (all too true).

Now about this charging the physician's family-I've always felt rather highly complimented when a brother disciple singles me out to treat one of his family, and I go out of my way to try to live up to that compliment.

The article published in December MEDICAL ECONOMICS under the head "When His Patients Call Him, He Goes; But When It's His Wife. He Just Laughs"-aroused a mixture of feelings. Incredulity, pity, amusement-but not much sympathy. Here are a few of the replies.

suppose though, if he were to call me for every little ache that he could very easily remedy himself. I would soon begin to lose some of my exaltation.

One thing I do know: if I referred my wife to another surgeon for gall-stones, I'd have just made the diagnosis; at least she would have had the benefit of a careful examination.

Yes, Mrs. Doctor's Wife, twenty years is a long time to put up with such exaggerated nonsense -I wonder how you can still smile.

But, I too smiled and almost laughed at your husband and the two visiting Disciples-making their examination of your poor eye and the resulting diagnosis. It must have been quite a "merry" visit.

I certainly hope you may always be able to keep your "point of view" quite detached.

An Ethical Disciple.

N answer to the article written by a Doctor's Wife, please allow me to say that it is fortunate

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that MEDICAL ECONOMICS is not a lay publication. Were it such a publication woe be to the doctor-friends of those who would read it. There are so many discrepancies and untruths in the long article, that to contradict them all would require an article of equal length.

It is true that we live up to certain ethics, but they are reasonable ethics. The reason to my mind, why we do not treat serious illnesses in members of our own family is three-fold:

First: we wish to shun the responsibility attached to treating one of our own. Should a fatality occur we would be more apt to have a vision of death before us. This might have a psychological effect on the mind of many a doctor.

Second: In treating not only one of our own but a very close friend we are apprehensive, and the old adage that in trying to do too much we may do harm holds true. Such apprehension influences one's train of thought.

Third: In the eyes of the unwritten law, in case of death to a member of our immediate family, not being attended by an outside physician, we are laymen, and subject to investigation.

It is unfortunate that this woman married a doctor of the type
she describes, but it is only because of his individual feelings
toward her that she is made to
suffer. Had she married anybody
else of an entirely different calling, who would hold the same
feelings toward her she would
find fault with him also. She has
an illusion that unless you pay
for service you do not get it. I
do not hesitate to say that many
people who did pay for service
did not get what she got gratis.
Her illusion applies to many people.

In my experience doctors who treat doctors' families are only too glad to get the opportunity. It is a credit to a physician when he is entrusted with treating the wife and children of his colleagues. He gets remuneration, many times over any fee that he might submit, by having patients referred to him, and this is what he prefers.

It was too bad about the splinter in the eye, but again it is not because doctors do not want to treat their own but because her husband did not care.

I am surprised you allowed an article of this type to consume so much space, coming from one so unfamiliar with the ways of doctors in general. Her case is the rare exception, and no doubt she writes in a fit of anger. If she keeps it up she will be a good candidate for dementia, if she should not be classed as one already.

D. H. Cooper, M.D.

THE article by a Doctor's Wife is amusing and also tragic.

I think some doctors are crazy. I myself give my entire family the once-over several times a year, and whenever an ache or pain is noticed medical attention is immediately given, by myself.

No other doctor would ever touch my family as long as I am around. I would not for one minute think of letting any other doctor but myself conduct my wife's confinement.

I treat doctors' and dentists' families but I present my bill for services and they (dentists) do the same to me.

That is the way we do it.

E. L.

THE wife's experience in December MEDICAL ECONOMICS, is so different from my own that I am going to tell my side. As the daughter of a long line of physicians and the wife of one for more than a score of years, I feel qualified to speak—indeed I feel challenged.

I have always believed a good physician the most noble of men

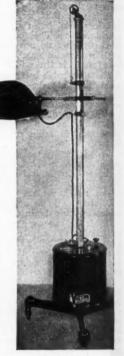
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and the best husband in the world. Of course I know the wife of a doctor will have her time interrupted—hours are irregular—and as far as shining in society, it is often difficult. In entertaining at home, the host is often called away in the midst of festivities, or not present at all; and I know how hard it is to call up a hostess at the eleventh hour and tell her the doctors chair will be empty at her dinner table. But we have marvelously understanding friends, and always are forgiven for late arrivals and early departures. It is all in the game, they know.

As for care when I myself am sick, my experience has been so different from the poor lady who has told hers, that I cannot but marvel. My doctor is all tenderness and care and eagerness to help when there is illness at home. And I mean just those words. He spares no trouble or expense for me. I know his wealthiest patient receives no bet-

ter care.

And that is just what has always impressed me most about these marvelous doctors. Money is a very secondary question when it comes to real service. The desire to help comes first with them.

I know the unwritten etiquette of a doctor not attending his own family. When we have had need of our doctor friends, it has always warmed my heart at the generous and eager response.

Just recently I have had to have some rather disagreeable and painful work done in my throat. I must confess I was a bad patient and as I dreaded treatment neglected to go as often as I should. The physician, a very busy specialist was so kind, even telephoning me that I should come to see him, that I went as much to show my gratitude to him as for my own good.

My friends all marvel at the way my maids have stayed with me, one having been in my service twenty-six years, the other thirteen. I truly believe it has been the doctor's kindness to them more than my own. They have always had the best of care in any illness, great or small, at absolutely no expense to them. One of the girls had a very serious sudden illness a few years ago. One of our surgeon friends operated upon her and my husband attended to every hospital and nurse bill, while paying her wages during her time away from service.

When the doctor himself had a very dangerous illness some years ago his colleagues simply flocked to his assistance. Such kindness to me—such care of the patient! You can't say anything against these doctor-men in my presence! I know what they are.

Nothing that breathes is too insignificant to go without their healing touch in time of need. About a year ago a police dog bit my fox terrier, badly tearing his neck. I attended the little invalid as best I knew how. At bed time I asked my husband to look at the little fellow as I feared he was badly hurt. One glance assured him that he was worse than I feared and he scolded me for not having spoken to him sooner.

He telephoned a colleague, told him his trouble and asked if he would give an anesthetic to the little fellow while he operated. In brief time; the friend was there and the little dog was tenderly operated upon and bandaged.

No, the lady is wrong. Doctors are the best men in the world. Long may they flourish. We would be poor indeed without them and fortunate is she who

has one for a husband.

Mrs. Edna M. Shepard.

THE doctor's wife in MEDICAL ECONOMICS, should not go unchallenged. Her article would probably be more effectively answered by the wife of a physi-

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cian, but the experience of any one wife is bound to be rather limited, as was that of the doctor's wife who wrote the original article. The position of a doctor's helpmate is an important one; books have been written about it, and anything affecting it in such a measure as medical care should not be treated rashly by one who has experience with but one or a few cases.

Let's first study for awhile the make-up of the lady who wrote the article and that of her doctor-husband. She is plainly introverted and of a paranoid trend of mind or she would never have gone to the trouble of writing the article. She has kept these things penned up inside of herself for twenty years, and now they burst their bounds in this fashion, and she undoubtedly feels better. She readily admits that she keeps things to herself when they hurt. She sat through a dinner with a broken ankle, because she was the praecox sort of person who could do that sort of thing.

Now, what sort of fellow is this husband of hers? A pronounced manic, extroverted type, likeable, undoubtedly. He can laugh off anything not directly affecting him. He does things in a hurried superficial manner, or he would have seen that cinder in her eye, noticed her broken ankle, or heard the bronchiectatic rales in her lung base. But he is surely likeable or she wouldn't have put up with such mistreat-

ment for twenty years.

To get down to the meat of the subject, I do not believe that doctors' wives are neglected medically by their husbands. I speak from the experience of three years spent in four hospitals where doctors' wives were nearly always included in the list of patients, from several years experience in general practice, and from a good many years as son of a doctor, and lastly as a seasoned husband of a doctor's wife.

In the dozens of doctors' families that I have known intimately, there has been but one instance of evident neglect of a wife and mother of doctors, and in that case the circumstances were so complicated and extenuated that there is a reasonable doubt as to whether we should offer criticism. In fact, my experience has been that as a rule the doctor's wife is accorded unusual courtesy and care: she has consultation with the best specialists available under the guidance of her husband. And the fact that doctors treat their wives for minor ailments is a matter of almost daily observation with me. I should say that the lady who wrote the article has plenty of cause for loud and vociferous complaint, but she should not generalize.

The question raised about paying doctors for treating members of other doctors' families is an old one, and I believe of no importance. The old laundry slogan applies—"It all comes out in the wash." A physician has several ways of repaying his colleague who does him a service. He may send him patients, he may treat his family, or he may send a gift. Perhaps there are some pure business men in the profession who would prefer the gold stand-ard, but I think it is a rather fine tradition, and I care not at all whether shopkeepers charge each other or not. As for dentists and lawyers, I believe a careful investigation would reveal that there are many instances of interchange of services without charge.

The life of a physician's spouse is seldom an easy one and often truly burdensome. But I believe the lady's accusation about medical care is unfounded in the large majority of cases. However, it won't do any of us any harm to look about our own domicile a bit and make sure.

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A Doctor-Husband.

N December MEDICAL ECONOMICS, which, by the way, I great-

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Neuralgia and Neuritis have a way of their own . .

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ly enjoy and appreciate, there appears an article by a doctor's wife. I gather from this that the poor lady is practically an in-valid, and has been for some years, due entirely to the neglect of the doctor-husband. If she has represented the true state of affairs, and I am not doubting her veracity, then the doctor is guilty of gross negligence.

If there is anything in the code of medical ethics which forbids a doctor from attending members of his own family, I have never heard of it. If this alleged prohibition exists, I know a great many physicians who are guilty of violating it. I am guilty my-

self.

I have a fairly wide acquaintance among the doctors in my section of this state, and I know for a fact that they are apt to he a little more concerned when members of their own families are ill, than when some one else is ailing. They are apt to devote more time to a case in the family than to one outside. This may be wrong, but it is the natural re-

I really can not conceive of any physician worthy of the name, who would allow his wife to go untreated over a period of years with two ailments like bronchiectasis and a gastric ulcer. Nor can I conceive of a man who would fail to immediately attend his wife if she fell downstairs and fractured a bone in her ankle. I can hardly believe the statements I read are true, although why she should write them in detail, if they are not true, is more than I can fathom.

I do know, however, that her situation is the very rare exception. It is a good thing for her husband that his patients are not aware of the conditions in his

My experience is the exact opposite of hers when it comes to other physicians treating mem-bers of my family. I have a wife and three children. There have been times when it was neces-

sary for one or the other of them to be treated for some condition that was a little beyond my abilities. I have always found the doctors to whom I referred my wife or my children to be very courteous and anxious to do the very best they could. I never was able to detect that subtle difference which the doctor's wife referred to, in their attitude toward me or mine. If it exists, I have been too dull to recognize it, or else I have been fortunate in selecting colleagues to attend my family.

It is true that physicians do not charge for services to another physician, or members of his immediate family. We call it professional courtesy and it is that. Regardless of the fact that most of us are in the profession to make a living, the great ma-jority of us do have a few ideals left, and a few traditions. inhibitions and traditions with which medicine is surrounded have been built up through the centuries, not especially for the benefit of the physician, but for the benefit of his patients—the general public.

Critics often overlook this entirely-of course some of the criticisms are just. We shall no doubt need to revise some of our customs, perhaps drop some of our inhibitions and traditions if we are to continue to hold the respect and confidence of the public, but these have no bearing on the relations of a physician to members of his family as pa-

tients.

In the article under discussion the lady recites her individual experience, and from that assumes that all doctors' wives and families are subject to the same neglect. God forbid! I know it is not true, and for that reason I could not allow her to go unchallenged.

N the December issue of this magazine, appeared a plaintive note written by a doctor's wife.

This lady brought up again the age-old question, "Should a doc-

tor treat his family?"

It is only the probability that no one will answer her question, nor attempt to, and that her literary efforts will be ignored as have been her physical ills, which incites me to write the following reply, which, incidentally, it is hoped her husband will read.

My dear Lady:

The pathos of your position passes all humor. You are in a fix! I am glad you opened this question for it gives me an opportunity to discuss with you many points which have a bearing on medical ethics and economics, philosophy and practice.

To begin with, and this you should always keep strongly in mind, you are the wife, not of a tradesman, but of a man who practices a profession. And by tradesman I mean simply a man who makes a living by selling a commodity which in turn has been purchased from another tradesman, for cash. In other words, tradesmen do not extend "professional courtesy" to each other because their commodities have a definite market value. Why should they, as long as that value is known to the last penny?

How does this differ from your husband's work, you ask? In many ways. Your husband's services have a market value, true enough, but who is to estimate that value? Your husband? Even his lay patients do not always agree on his estimate and what a greater disagreement must necessarily be found among his brother professional men who are in a better position to know!

Should his professional patients attempt to put a cash value on services received? Pause before you answer. Might not such a frank evaluation occasionally embarrass your husband? No, I think it's too risky. Far better it is not to introduce honest tradesmen's methods into our profession.

You are only half convinced? Well, I agree with you. I think the matter is absurdly overdone, and hope you can help us ration-

It has gone to such ridiculous lengths that the doctor's doctor (I have Osler in mind) finds himself so overwhelmed by the demands upon his time, skill, judgment and patience, by doctors and their families, that his only recourse is to retire from practice. Why should doctors, who can never hope to reciprocate, make demands which seriously handicap the Oslers in the remunerative practice of their profession? At present we can only call it the penalty of greatness.

Before suggesting any solution to the above, let us look for a moment at the other end of this scale of absurdity. Professional courtesy has, according to you, given rise to a situation wherein you, a doctor's wife, are automatically deprived of medical attention.

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And now I am about to rush in where an angel might fear to tread. But I may as well be blunt. It is not professional courtesy, it is professional discourtesy. Your own words prove this. Consider them;—"as we lived in a village which at the time boasted but one other physician, I must either call this man (who never spoke to us due to professional jealousy) or go unmedicated. Naturally, I chose the latter course."

Need I say more? I will nevertheless. If your husband and his colleague (not rival) would act less like dogs snarling over a bone, and more like adult professional men who are practising medicine, you might find professional courtesy truly a delightful thing. What greater compliment can be paid one physician than to be asked to care for another's wife? And what can more firmly seal the bonds of friendship than to have cared [TURN TO PAGE 87]

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Dr. Putman began adding up old accounts one evening not long When he arrived at the total, he sat looking at it for several minutes. Then came the inspiration.

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is in the way of cancellation or re-duction of accounts due him for professional services. More than 200 persons in Marceline and vicinity will benefit.

will benefit.

Beginning this week, Dr. Putman is publishing in The News a list of names of all persons who will benefit by the cancellation or reduction of accounts due him. Another list will be published next week and the final one in the edition of Novembers of the control of the control

After the list had been compiled, it was found that the total amount in cancellations and deductions was

in cancellations and deductions was more than \$11,000.

The physician believes that business can be speeded up if many ac-counts, some of which were con-tracted in the balmy days of pro-prerity, were reduced considerably or cancelled outright.

Many accounts affected by Dr. Putman's action are of persons unaffected by Dr. rutman's action are of persons unable to pay a part or all of their indebtedness at the present time. If these persons were given a "fresh start," it is believed they would feel more able to purchase now many articles of necessities.

This renewed "purchasing spirit" would revive business materially, Dr. Putman believes.

Prompt to clear away their accounts were many of the patients whose names had not yet appeared!

Dr. Putman explains the plan: "I realized that the big majority of people who owed me could not pay, and that others probably would not make an effort

to pay.
"Some of the accounts I cancelled entirely; others were reduced by deducting varying amounts from 10 to 50%. amounts deducted-but not the

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The indications for internal iodine medication are many

SIOMINE

METHENAMINE TETRAIODIDE

meets these many indications because it produces the therapeutic effect of iodine or the iodides internally administered.

An organic iodide in solid form, Siomine is given in capsules, avoiding the distastefulness and inconvenience of solutions of the alkaline iodides. Gastric disturbance is rare, following its use.

"Siomine is best administered in capsule form during or immediately following meals."—N.N.R.

COUNCIL ACCEPTED.

Available in ½ gr., 1 gr., 2 gr., and 5 gr. capsules.

PITMAN-MOORE COMPANY

Indianapolis

PITMAN-MOORE CO., Indianapolis.

M. E. 2-32

Please send me test sample of Siomine and literature.

M. D.

No and St

City

State

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32

D.

amounts of the individual accounts—were published each week. A total of \$11,000 was deducted from my outstanding accounts.

"Most of those benefited were very grateful, and so expressed It seemed to give themselves. some of them a certain amount of confidence by reducing their indebtedness. Some paid no attention whatever, as it apparently made no difference whether they owed \$100 or \$50; they had no means of paying even one-half of what they owe.

"They were not charity patients to start with, but the effects of the hard times through

which we are passing has reduced the income of so many formerly good-pay patients that they now look on doctor bills as part of their expenses that can be entirely reduced.

"What I did has not hurt me financially, for I had come to the conclusion that the value of out-standing accounts had shrunk, and that admitting it would be as logical as admitting that the price of all other commodities had fallen. The last no one denies, as prices are published each day in all newspapers.

"Locally, the majority understood and appreciated, which was really more than I expected."

Receipt should show balance due

O Dr. Fassett Edwards, author of "The Receipt Trick," an article describing a new dodge for

reducing medical bills by half, comes this reply from Dr. K. L. MacLachlan, Melrose, Massachusetts:

"Would not the necessity of a law suit with its entangling legal forms have been avoided if the doc-

entanging legal forms have been avoided if the doctor used ordinary common sense business-house methods in sending receipts for payment?

"For example, whenever there was a balance due, the recipient of a payment should so mark the remaining balance clearly on the receipt, below the payment just received. Such payment can be signed by the doctor if desired, but it is not necessary. Also, the hill should be the seniored in full well all. the bill should not be receipted in full until all payments are made."

Here is a specimen bill illustrating Dr. MacLachlan's idea.

Fo NA.	JOHN J. BLANE, M. D. SO HILLSHOM AVENUE SHAFTETOWN, PA. LAW PSL	New 10 3
fail Bill re	reconn, cervicer remograss ordered	740
Oct. 1931-	99 Blank Tolan	10 °50
Nov. 1981 -	D. on assent Bil	10 040
Dac. 1931 -	A. on assent 3.9. Rlank Belo	0 30

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Any baby taking its daily ration of DRYCO is automatically protected against rickets!

"If all the milk for infants could be satisfactorily irradiated, there would be few, or very mild cases of rickets." Hess: Society Proceedings, Amer. Jr. Dis. Child. Vol. 41, No. 2, Feb., 1931.

Give Your Baby Patients Protection from Rickets Through Their Food - · IRRADIATED MILK

PRESCRIBE

DRYCO The Antirachitic Milk

Made from superior quality milk from which part of the butterfat has been removed, irradiated by the ultraviolet ray, under license by the Wisconsin Alumni Research Foundation, (U. S. Patent No. 1,880,818) and then dried by the "Just" Roller Process.

COUPON

Send for samples and new booklet: "Irradiated Dryce."

The Dry Milk Co., Inc., Dept. ME, 205 East 42nd Street, New York, N. Y.

ALL DRYCO IN THE HANDS OF DRUGGISTS IS IRRADIATE

The Doctor's Desktop

MORE INVENTORIES

well-known Part Two physician author rives this description of the big nahogany roll-top desk at which he writes and practices:

No. 1 area (starting at right):
No. 1 area (starting at right):
About one dozen magazines, piled neatly, on top of which is a small black leather case history book. Out of these magazines project various sheets of page-size clippings from medical journals. Not tidily adjusted. At the edge of the desk, in front of this pile of things is a small mound of folded papers and small pamphlets swatting a second reading, also some carbons of stories, in the making, sot finished.

No 2 area: A two.inch.deen nile

No. 2 area: A two-inch deep pile of letters and one tax dun from the nty. These are pending comple-and are not filed, else they'd County. be forgotten quickly.

he forgotten quickty.

No. 3 area: Fairly clear here, except at the back of the big leather
and green blotter deak pad sits a
small mahogany box containing a
card file system for my writing.
Alongside this loiters a deak pen
holder of Mexican onyx and a big
long pen arising therefrom.

No. 4 area: A few medical maga-sines, a copy of Time, a small pile of unpaid bills. The bill pile would be larger except that I pay them on the tenth of the month and they have not all arrived. Among these are scattered a few private letters, which pile up until I can't stand it any longer and answer them. any longer and answer them.

No. 5 area: A five-inch pile, very untidy, of story work, in the making, carbons, plots, suggestions for articles and what have you. That's the editorial corner, so to speak, and I might add suggestively, the most disorderly of the whole big desk.

disorderly of the whole big desk.

On top the desk, starting at the right, stands a picture of my dead wife and living daughter, the telephone (no room on the desk for it, although my long arms easily reach lib. At its left stands a tall, hooded brass desk lamp, always running, often until midnight. A small, ornamental clock, a relic of the late war, an aviation clock mounted in an inlaid walnut base. At the left of the clock sits a dull green squatty pet, on a black teak stand, sadly empty of flowers just now, although my garden harbors lots of roses now

in full bloom. At the left of the pot stands a picture of my only child, the daughter, as a fat little baby. I did not mention the three bottles

I did not mention the three bottles of samples on the left corner, relica of the recent visit of a detail man. Now do you believe that I have the worst looking desk in the U.S.A.? But the rest of my office is as nert as wax. I let down at the desk. Often it holds a big Remington Noiseless.

A general-practitioner, also an author:

Telephone and roller pad.
Three medical journals and MEDI-CAL ECONOMICS.

Dictionary; samples left by a man who took up too much time; bank

book in case someone gives me a check.

Pad of notes for those who have no check; pen, ink, crasers. A couple of rejected manuscripts— and my speech. (My wife has not been in the office recently).

[TURN THE PAGE]

Some disorderly and littered. some clear and business-likethe physician's desktop inventories continue from last month. Check these against the material on your own desktop.



The ONLY Refinery Sealed

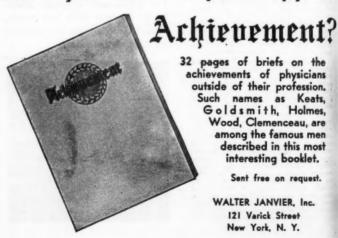
Castor Oil in America---

U. S. P. **TASTELESS ODORLESS** NO AFTER-NAUSEA

> "Protected from the Influence of Air"



Have you sent for your copy of



32 pages of briefs on the achievements of physicians outside of their profession. Such names as Keats, Goldsmith, Holmes, Wood, Clemenceau, are among the famous men described in this most interesting booklet.

Sent free on request.

WALTER JANVIER, Inc. 121 Varick Street New York, N. Y.

ICS

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A surgeon:

A Surgeon.

Plate-glass under which is a small motto reading: "I once had three friends; to each one I loaned some money: now I have neither the friends—nor the money. I have resolved to lose no more friends."

An eye, ear, nose, and throat specialist:

Desk lamp for light, and hence inspiration.

Pen and ink stand for records, and hence accuracy.

Appointment book for the day's hedule, and hence foresight. Letter-file for correspondence, and

ce up-to-the-minute efficiency. Telephone for contacts, and hence opportunity for tact and courtesy which promote business health. (These make five important articles of salesmanship constantly until the detectors need to be a contact the detectors need to be a contact the detectors need to be a contact to the detector need to be a contact to the detectors need to the d

der the doctor's nose.)

A general practitioner:

Small neat desk calendar for appointments.

pointments.

Desk pad which opens out like a book and contains two blotters, or folds up to size 18 by 26 inches.

Fountain pen, a small neat one with base holder.

Cigarette humidor and neat brass

ash-tray. Telephone. (I keep all papers in desk and file cabinets).

A general practitioner:

Telephone, desk lamp, memo calen-

Combination writing pad and systematizer.

Small bust of Napoleon, and and vase in which a rose is kept at all times.

A general practitioner:

Fountain pen, daily account sheet,

Fountain pen, daily account sheet, memo pad.

Record of frequently used telephone numbers, blotters, clock, lead pencil, folder for day's mail.

Prescription pad. (Remainder of things such as case histories and health forms are filed in deak drawent, convenient for reaching without getting up out of chair or disturbing patient). patient).

A surgeon:

Telephone, bundle of unanswered letters, calendar. Pile of unread magazines, two text books of physics, a text-book on x-ray technique, and a text-book on

diseases of stomach.

Small radio, and a box of cigars.

Prescription pad, pencil, letteropener, and several miscellaneous
bottles of samples.

Another general practitioner: Deskpad, pen stand with two pens,

Jesspan, ash tray.

Two letter-boxes for correspondence, calendar pad, paper weight, three hand atamps.

French type telephone, memo pad,

French type telephone, mand blotter.
(BUT on table behind me—papers, medical journals, and miscellaneous matter which the average doctor saves to read, and never does.)

Special hospital for movie patrons



The Emergency Hospital in the Roxy Theatre, New York, is equipped to take care of anything from a case of fainting to a major operation. The hospital occupies a whole suite on the fourth floor of the theatre. Twelve physicians are on call, and a nurse is always on duty during rehearsals and performances. Gangster pictures brought an increase in the number of hysteria cases treated.

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VAPEX

... RELIEVES CONGESTION ... REDUCES IRRITATION ... BRINGS PROMPT RELIEF

THE application of a few drops of Vapex to a handkerchief during the day and to each end of the pillow at night gives off a pleasant vapor which relieves distress in minor nasal infections.

By contracting the spongy tissue of the nasal passages and reducing the formation of excess mucus, Vapex permits freer passage of air in breathing. It is valuable in aiding sleep when a congested condition retards slumber.

The vapor is non-toxic and is well tolerated by children.

As an addition to your regular prescription for colds, Vapex brings a prompt relief from the more distressing symptoms, tends to soothe the patient, and is refreshing.

A bottle of Vapex will be sent to any physician requesting it on his prescription blank.

VAPEX

Reg. U. S. Pat. Off

E. FOUGERA & CO., Inc., 75 Varick Street, New York. Distributors of Medicinal Products Since 1849

he 'Why' of Your 1931 Income Tax

By HON, OGDEN L. MILLS Undersecretary, U.S. Treasury Dept.

Do you, like the average man, feel patriotic EX-CEPT when you write your income tax check? Have you ever given thought to the problems of the National Budget-how they concern you, your home, your savings?

Do you realize that the present depression is only a small sample of what might ensue from an unbalanced National Budget? Did you know that twothirds of the Federal financial structure rests upon income taxes?

Read here what is probably the clearest exposition of national finances ever made by a government official. We print this article, a summary of Undersecretary Mills' address to The Economic Club of New York, because we believe EVERY DOCTOR SHOULD READ IT FROM THE FIRST WORD TO THE LAST.

many fiscal problems which confront our Government in these difficult times. Adequate . comprehension and support on the part of the Nation is essential to the Government in the performance of its fiscal functions.

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of our people, irrespective of whether they

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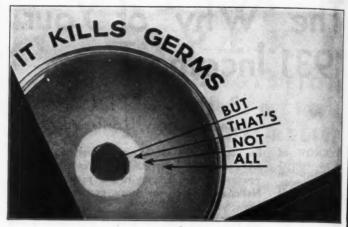
We closed the last fiscal year with a deficit of \$903,000,000. We are confronted this year with a prospective deficit of \$2,123,000,-000, and it is estimated that expenditures will exceed receipts by no less than \$1,417,000,000 in the fiscal year 1933. If we contrast these figures with a surplus of \$184,000,000 in 1930, one of \$185,-000,000 in 1929, and of \$399,000,-000 in 1928 we are shocked at the

violence and suddenness of the

change.

For, while I am sorry to say that a falling off in income is an all too common experience these days, yet our Federal Government is so strong and our national resources are so great that somehow or other we feel that our Government should be superior to the ills to which individual citizens are subject. Indeed, there is so much truth in this conception that, as we shall see, the Government has but to make a further call upon available resources to put its financial house in order. [TURN THE PAGE]

34: 1



Let us send you this demonstration

Every physician will be interested in reading this remarkable report, proving the antiseptic, germicidal and penetrating action of Unguentine. Write for it today and ask also for free Physician's sample.

Unguentine is a true antiseptic that more than meets the strict government requirements for antiseptic strength. It has, moreover, the unique advantage of being analgesic, healing, and in a form permitting prolonged, continuous contact with burn or wound, with consequent penetration of the antiseptic.

We emphasize the effectiveness of Unguentine, under the conditions of practical application.

It is efficient in the presence of

serum and organic matter, and is non-toxic, non-irritating, non-deteriorating. It quickly allays pain — does not adhere to the wound, nor interfere with the healing process. Above all, it is dependably antiseptic and may be relied upon to safeguard against secondary infection and its consequences.

Write for report, illustrated above, and ask for Physician's sample.

The NORWICH PHARMACAL CO. Norwich, New York

Unguentine

THE ANTISEPTIC IN



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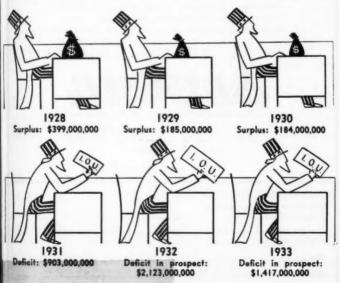
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To grasp not only what has happened in the immediate past but what should be done in the immediate future it is necessary to understand our revenue system, and to note the essential fact that it rests on a very nar-Take the fiscal year row base. 1930 as an example: We find that in that year, out of total receipts from taxation of \$3,626,000,000, no less than \$2,411,000,000, or two-thirds, was collected from income-tax payers, corporate and individual; \$587,000,000, or 16 per cent, from customs duties; and \$628,000,000, or 17 per cent, from miscellaneous internal-revenue taxes, of which the tax on tobacco contributed \$450,000,000 and the stamp taxes, chiefly on the issue and transfer of securities, about \$69,000,000.

But it is when we come to the income tax on individuals that the dangers incident to too narrow a tax base are most strikingly exemplified. The number of individual returns for the calendar year 1928 aggregated 4,071,-000. Of this number 382,000 taxpayers contributed \$1,128,000,-000 and the other 3,689,000 individuals who made returns contributed but \$36,000,000.

Clearly, under our system large and moderately large incomes bear practically the full burden of the individual income tax. Now, these incomes, as we shall see, are the very ones subject to the widest fluctuations, since they include business profits, and more particularly because in recent years the element of gain and loss resulting from the purchase and sale of capital assets has had on them a prepondering influence.

Taxes returned on individual incomes fell from \$1,164,000,000 for the calendar year 1928 to \$474,000,000, according to avail-



What the depression has done to our National Budget.

su

Hyperacid Stomach Treated Colloidally

T has remained for colloidal chemistry to supply the answer to an age-old problem—"How to reduce the excess acid harmlessly in the treatment of gastric hyperacidity?"

The new method involves the use of a colloidal type of aluminum hydroxide known as ALUCOL.

ALUCOL does not act by chemical neutralization—it simply reduces the excessive acid by a physical process—adsorption, leaving a sufficiency of acid for continued peptic digestion.

ALUCOL is not absorbed into the system; therefore, it cannot produce an alkalosis. Furthermore, it possesses the added advantage that it does not cause that secondary and more pronounced rebound of acidity commonly observed after alkaline medication.



Every physician interested in antacid therapy is urged to write for a trial supply of ALUCOL and full information.

Use Coupon Below

THE WANDER COMPANY, 180 North Michigan Avenue, Chicago, Ill.				Dept. M.	E.
Please send me, without clinical test, with literature.	obligation, a	container	of	ALUCOL	fo

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able information, for 1930. The number of returns of those with incomes of from \$5,000 to \$10,000 fell from 561,000 to 506,000, while the tax paid fell from \$21,000,000 to \$17,000,000, or 22 per cent. Of those with incomes from \$10,000 to \$100,000, the number fell from 360,000 to 252,000, and the tax from \$409,000,000 to \$208,000,-000, or 49 per cent, while of those with incomes of \$100,000 and over the number fell from 15,780 to 6,152, and the tax from \$700,-000,000 to \$238,000,000, or 66 per cent.

While income from all sources declined, the one chiefly responsible for this almost perpendicular drop was gains from the sale

of capital assets.

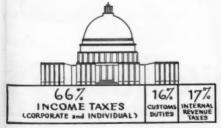
If we take the returns of individuals with net incomes of \$5,000 and over, we find that the aggregate net income returned fell from \$16,299,000,000, in 1928, to \$10,119,000,000, in 1930, or a decrease of \$6,180,000,000, and of this amount no less than \$4,230,000,000, or about 68 per cent, is accounted for by the reduction in net profits in excess of losses, resulting from the sale of capital assets.

The question of taking into consideration, in the determination of taxable income, gains and losses from the purchase and sale of capital assets, has been the subject of much discussion. Many people believe that this feature of our income tax law should be eliminated, on the ground that it tends to promote, rather than to discourage, speculation in periods of expansion, and that it has a depressing effect in times of recession. I am inclined to think that this criticism is too sweeping, and that the supporting data are inadequate.

For who can contend, as a matter of principle, that the handsome gain yielded without effort by a quick turn in the market is a less legitimate object of taxation than a hard-earned salary or the remuneration of doctors, lawyers, engineers, and other professional men, whose earning capacity is developed only through years of constant application and unremitting effort?

To summarize, our Federal Government relies on a very limited number of taxes, subject, generally speaking, to extreme fluctuations. It places its chief reliance on an income tax which, because of the character of its structure and the narrowness of its base, is susceptible to sharp increases and precipitous drops.

There is the situation. In this period of deep uncertainty the unimpaired credit of the Federal Government is the most priceless possession of the people of the United States. We assume its existence as we assume the con-



66 2/3%, or \$2,411,000,-000, is dependent upon income tax payers (corporate and individual).

16%, or \$587,000,000, upon customs duties.

17%, or \$628,000,000, upon internal revenue taxes.

The tax foundation of the United States Government.

PLEASANT and Refreshing

in the diet of pregnancy

WHITE ROCK MINERAL WATER stimulates appetite, helps allay nausea, favors liberal water intake thus helping elimination, and gives the benefits of a mildly alkaline water.

Used as a table water, or sometimes a half hour before eating.

"Carbonated water is a useful drink in febrile affections, as it relieves thirst, allays nausea and gastric irritability, and is both diaphoretic and diuretic in slight degree. It is an efficient remedy for vomiting and in the form of iced champagne is one of the numerous agents which have proven efficacious in the vomiting of pregnancy."

-Dr. S. O. L. Potter,
Therapeutics, Materia Medica and Pharmacy.

For Mineral Analysis or other information address

WHITE ROCK MINERAL SPRINGS COMPANY

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tinuance of unlimited supplies of air and sunlight. It has been established through the pursuance of sound fiscal policy in the past and so must it now be preserved. The immediate cost in increased taxes is small in comparison with the immediate and lasting benefit to the Nation.

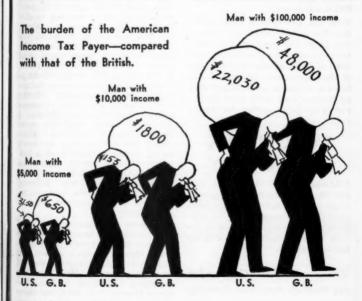
This credit structure of ours, depends to a very great extent upon the confident belief that the Government will meet its financial obligations promptly and punctiliously, on every occasion and in every emergency. Our currency rests predominantly upon the credit of the United States. Impair that credit and every dollar you handle will be tainted with suspicion.

The foundation of our commercial credit system, the Federal reserve banks, and all other banks which depend upon them, are inextricably tied into and dependent upon the credit of the

United States Government. pair that credit today, and the day after thousands of development projects-they are still going on-will stop; thousands of business men dependent credit renewals will get refusals from their bankers; thousands of mortgages that would otherwise be renewed or extended, will be foreclosed. Merchants who would buy on credit, will cancel orders; factories that would manufacture on part capacity at least will close down.

It is true that a distressingly large minority of the wage earners of this country are now out of work. But we must not forget that a majority still have enough work to make a living. We have lost much; but we have infinitely more to lose.

What we still have, what we hope for in the future, are dependent in a large degree upon the preservation, unimpaired, of





Chronic cases of Endocervicitis

(with deep Nabothian cysts)

are best treated with the fine wire cautery tip, characteristic of COM-PREX equipment.

With the COMPREX CAUTERY, heat flow is practically instantaneous, thus permitting completion of operative procedures long before the radiation of heat can extend to the stem of the instrument. Because of this feature, exclusive with COMPREX equipment, there is no local discomfort or danger of searing the vaginal wall.

The COMPREX • CAUTERY

Sold complete with electrodes at only \$28.50, and offers many advantages which cannot be duplicated in more expensive instruments. Yet the quality is adequate for a life-time of service. See your dealer, or write us for full information.

Comprex Oscillator Corporation 450 Whitlock Ave., New York City

the credit of the United States. It will cost something to preserve it. The cost is additional taxation. The wealthy, the captains of industry, the bankers, must contribute to meet this cost; but the small business man, the whitecollar man, the farmer, and the wage earner, have an equally vital stake in the preservation of the Nation's credit. The new taxes will cut into the incomes of the rich, and they will affect by some small amount the contributions made to the Government by those in moderate circumstances. But the result-the preservation of the credit-is worth this cost, and for that matter, an even much great-er one, to all who are called upon to make some temporary sacrifice.

As the Secretary of the Treasury pointed out in his Annual Report, there are certain basic principles in the conduct of public finances which can not be disregarded by any nation. First, the sinking fund, designed for gradual retirement of the public debt, must be maintained, and when of necessity the public debt is increasing, the regular sinkingfund appropriations must be accepted in the accounts of the Government as fixed charges against revenues. Second, over a period of years, revenues must be equal to expenditures. ciency for a time may be inevitable, but the principle of a balanced budget must never be abandoned, and when emergency balance. conditions upset the every effort must be made to restore it at the earliest possible opportunity.

Bearing constantly in mind that additional taxes should not be so great as to retard the business recovery, upon which the restoration of the normal flow of revenue depends, the Treasury program submitted to the Congress December 9, 1931, has three definite objectives: First, a re-

duction in the prospective deficit this fiscal year; second, no further increase in the public debt in the fiscal year 1933; third, a balanced budget in 1934. We do not feel justifled in asking for more: we would have failed in our duty had we recommended

Generally speaking, the program provides for the retention and in some instances an increase in existing excise taxes; a restoration of the manufacturers' sales tax on automobiles, trucks, and accessories; of the stamp tax on conveyances of realty; and of the tax on telephone, telegraph, radio, and cable messages; and the imposition of new taxes on manufacturers' sales of radio and phonograph equipment and on checks and drafts. The rate of seed make sure it tax on corporate income is in- is a variety that measures up to your ideas of creased but slightly from 12 to cleanliness and wholesomeness. 121/2 per cent.

There is an emergency, and we are proposing emergency measures to meet it. Men who still have very large incomes can not ever, in prescribing object, under the circumstances, to contributing largely. Men with large incomes comparatively should be willing to do their but comfortable circumstances will surely feel that they can spare something for the supproper understanding of porary sacrifices demanded will be met, if not joyfully, at least wholeheartedly and with philoso-phy and good humor.

After all, even in these days which appear so dark, we are still fortunate as contrasted with other nations. After a hard-boiled Treasury has done its worst, and when you gloomily view the approach of the ides of March, I suggest that you place these figures on your desk and make out your income-tax return:

A married [TURN TO PAGE 85]



HEN you prescribe psyllium

Psyllium seed as it comes from the pro-These are not normal times, ducers abroad is grievously contaminated with waste material that is not fit for human

You can have the utmost confidence, how-

PSYLLA (Plantago Psyllium)

This is not the ordinary commercial seed, share, and those in more moder- but a highly refined product which has been subjected to a most efficient cleansing process, including screening, sifting and fanning. In this way the dead, shriveled up seed is report of their Government. I am moved, as well as half a dozen kinds of waste confident that, if only there be a material which should never enter the the stomach

necessities of the case, the tem- NOTE Psylla is sterilized. There is an inner seal on each can which is a guaranty of its wholesomeness.

Insist on Genuine BATTLE CREEK

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made from genuine, concentrated PHILLIPS' MILK of MAGNESIA

Now you can get that dependable antacid, Phillips' Milk of Magnesia, in convenient, pleasant mintflavored tablets!

The problem of concentrating true, liquid Milk of Magnesia in stable tablet form has not been easy. Years of painstaking effort have been spent in developing Phillips' Milk of Magnesia Tablets.

Each tablet contains 4.8 grains of precipitated magnesium hydroxide, and is equal to one teaspoonful of genuine, concentrated Phillips' Milk of Magnesia.

You will readily appreciate the new convenience offered in this form:

For the small, frequent doses which the most effective alkalization treatment calls for. These tablets can be easily carried in pocket or hand-bag, and taken when and where necessary.

Their delightful mint flavor appeals to almost every taste. Children, particularly, like them; take them as readily as candy mints. They melt quickly; leave no unpleasant after-taste.

You know the effectiveness of Phillips' Milk of Magnesia as an antacid. Now you can recommend this new form to your patients, more certain that they will follow your instructions as to use.

IN SLENDER, LIGHT BOXES OF 30

Handy to carry in vest pocket or hand-bag.



OF 60

A supply for the family medicine cabinet and traveling-bag.



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Office Control

[FROM PAGE 14] ing. Next, in the evolution of the doctor's records, comes:

The card file. (Single—Active Patients only). In this instance the file is completely alphabetized, including accurate alphabetizing within each letter (Example: Abbott, Adlon, Allen, Anderson, Arlen, Atterbury, etc.). Next comes:

The card file (Multiple—three-drawer file). In this instance, the files are completely alphabetized as before, but provision is made to maintain complete files for each of these classifications:

Services Rendered

Active Patients. Unpaid Accounts. Case Histories.

As new patients come for the first time for treatment, their record cards are filed at the proper alphabetic point in the Active Patient file drawer. Similarly, for-mer patients returning for further treatment after a considerable lapse of time have their record cards returned to the Active Patient file. As patients complete their treatment, with the charges yet unpaid, their record cards are transferred from the Active Patient file into the Unpaid Ac-When the charges counts file. have been paid in full-and not until then-the record cards go into the Case Histories file for convenience in future consultation.

There are, of course, as will be seen in a later paragraph, enormous differences in the scope and completeness of card-file sys-

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Figure IV: A
still more
elaborate
card-record
form, allowing
for expansion
of history,
diagnosis,
treatment,
etc. Reverse
side is shown
on next page.

NORFORMS



THE IDEAL FORMULA



. . . in the ideal form for vaginal prophylaxis

The form of Norforms is one of their inherent advantages. Convenient, requiring no apparatus for application, Norform suppositories are standardized and unvarying. A further Norforms advantage is that their antiseptic ingredients are not only non-irritating, but the vehicle itself is definitely soothing to inflamed and sensitive tissues.



Norforms provide a stable, non-irritating antiseptic in a form adapted to prolonged and effective contact with the vaginal area. Indicated for leucorrhea, vaginitis and cervicitis as well as for general vaginal prophylaxis.

THE NORWICH PHARMACAL CO. Norwich, N.Y. Makers of Unguentine

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tems. For example, they may carry nothing more than name, address, telephone number, a line on treatment given, charge, cash received, and balance.

Or they may combine a full clinical record plus a full set of simple bookkeeping entries. The size of the practice and the individual preferences of the practitioner usually dictate the com-pleteness of the card.

The installation of a highly-developed commercial record-system is ordinarily the final stage in the evolution of the office control. The only deterrent to the more widespread use of the "automatic desk" type of commercial installation is its cost. There is no question about its efficiency, if properly used.

Now let us take the actual case of a certain doctor with whom I am acquainted. He does a better than average annual gross prac-tice. We will say, for purposes of illustration, that he sends out about fifty statements to arrive on the first of each month. His bookkeeping methods are

simple, as they should be. He maintains two extremely simple card files, the first for Active Accounts in which the patients are currently coming for treatment, the second for Inactive Accounts (as he calls them) in which the patient is no longer coming for treatment. From these cards the girl takes off the billings at the end of the month.

It is, by the way, a matter of

passing interest that, from the

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Figure V: Reverse side of Figure IV. Card folds in middle, giving four recording faces-though filed as one unit.



Packaging Tablets

(Sixth of a series of advertisements on the making of tablets.)

GOOD tablets deserve to reach the patient in good condition. Therefore Breon tablets, made to disintegrate quickly in the patient's system, are packaged with care by hand to prevent disintegration in transport.

An effort is made in the appearance of each bottle to reflect the improvement that has been made in the tablet content during the last two years.

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GEORGE A. BREON & CO.

Pioneer makers of sterile solutions

Kansas City, Mo.

NEW YORK ATLANTA LOS ANGELES
319 W. 50th St. 408 Rhodes Bldg. 2050 N. New Hampshire
SEATTLE, 6035 Eighth Avenue, N. E.

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fifty letters sent out, from one to five are likely to come back from the United States Post Office with the familiar stamp, "No such person can be found at the address indicated." In these cases either the name, the address, or both, are bogus. There are ways to combat this dishonest practice, but they are the subject for a different discussion.

It is evident that even such a simple two-way card file as the one employed by my doctor friend is much more efficient, by any test, than is the day book and ledger system. The day book and ledger method, in the face of a growing practice, sooner or later faces an inevitable break-down.

I have a suspicion that a great many words are wasted by both doctors and patients because the information taken at the first visit is not fully recorded, and because, therefore, that information must be asked all over again at the second and sometimes at the third visit.

It is, in my judgment, far better to have a phenomenal cardrecord system in your office than a phenomenal memory under your hat. If you work with associates, your phenomenal memory will not always help them. Your card-record system will.

What are, then, the advantages of the card-record system? Would you not admit these?

Income-outgo control.

Collection control.

Quick reference convenience.

Flexibility in rearrangement between files.

Flexibility in taking items of information.

The last item alone saves your own time, saves repetition on the part of both the doctor and the patient, and registers a much better business impression, if you happen to want that. The saving of time and the avoidance of

needless repetition are the most important.

I believe any practitioner will admit without much hesitation that, other things being equal, it would be helpful to have all on one form in one place with one writing: (a) the routine data such as name, address, and telephone number of the patient; (b) the financial charge; (c) something of the case history and the treatment, if considered important and essential.

It is with these ideas in mind that I have designed the forms reproduced with this article. All forms are based on a card measuring 4" deep by 6" long. Figure I is a rigorously simplified form for the doctor who feels he can conduct his practice with a minimum of information.

Figures II and III represent the front and back, respectively, of a card-record form which is much more comprehensive in its

BILE SAITS COMBINED Lederle

With Cascara and Phenolphthalein

THIS combination contains .065 gram, (1 grain) Purified Bile Salts, .033 gram, (½ grain) of Extract of Cascara and Phenolphthalein. Indicated to relieve constipation and its secondary factors.

Physician's sample on request

LEDERLE LABORATORIES

INCORPORATE

511 Fifth Avenue

New York

FURTHER PROOF

Investigation shows that there is no substitute for cod liver oil



Following an extensive series of animal experiments to determine the relative therapeutic values of cod liver oil and irradiated ergosterol, Prather, Nelson and Bliss (Am. Jr. Dis. Child., July, 1931) reached the conclusion that:

"Viosterol does not demonstrate the power to stimulate growth and development of the body and vital organs, nor to prevent infections of the upper respiratory tract, nor to produce the same degree of calcification and growth of the bones as does cod liver oil."

"Since 'colds', malnutrition and intestinal inadequacies are more frequent in children than are rickets, this study emphatically suggests that the apparently widespread substitution of viosterol for cod liver oil, in the diet of the child, is not logical and may result in an appreciable decrease of the child's strength and resistance to infections."

Cod liver oil made "The Patch Way" is not only of maximum vitamin potency but it offers a pleasant, palatable way of taking "the clinical heritage"—cod liver oil.

Let us send you a supply of Patch's Flavored Cod Liver Oil for a test.



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THE E. L. PATCH COMPANY

BOSTON, MASS.

THE E. L. PATCH Co., Stoneham 80, Boston, Mass.	Dept. M.E. 2,
Gentlemen: Please send me a sample of Patch's Flavored and literature.	Cod Liver Oil
Dr	
Address	
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findings. This card form will be preferred by the doctor whose practice is of a considerable size, and perhaps also by the doctor who finds later value in more fully developed case histories. In all cases, moreover, where dependence on memory is out of the question, the forms illustrated in Figures II and III are preferable. It is to be noted that these forms are used on the front and back, respectively, of the same card.

An even more elaborate cardrecord form, with additional provisions for the expansion of case history, diagnosis. complaint. surgical procedure, treatment. and prognosis, is shown in Figures IV and V. The card measures 4" x 6" but is a double card with the fold at the top. Although the card can be filed as a unit, there are four faces (instead of only two as in Figures II and III) available for information and bookkeeping records.

What about the factor of fire hazard? I have had many an inquiry from members of the medical profession asking for advice on proper methods for protecting records against fire. The value of records in a doctor's office is in one sense intangible and beyond proof. In another sense the value of these records to individual patients in the community, and even to the great body of medical science in the abstract, may be beyond measure. There is only one positive method to insure them: that method is the fireproof safe. It is obvious, however, that any filing cabinet of ordinary size is too large by far to go into the usual office safe. The solution?

If the matter of fire hazard

Oil

bothers you in connection with safeguarding your account records, and the card-files are too large to go into the safe, it is always possible to have the girl draw off from the individual cards the following data as each of the new cards is entered in the file:

Name Charges Cash Balance \$40.00 \$10.00 \$30.00

On the other hand case histories must be physically filed in the safe. There is no alternative except a fireproof filing cabinet itself.

Of the four major types of general filing systems in use in the business offices of America-Alphabetic, Numeric, Geographic, and Subject-the only one which need be considered for the average medical office is the Alpha-This should govern both record cards and correspondence. Correspondence should be filed in individual manila folders, a folder for each letter of the alphabet. Papers should be filed in the folders in the order of dates, the latest paper being filed toward the front in order that it may be the most accessible.

All cards and correspondence folders should be completely alphabetized between stiffer dividing "guides", each guide carrying a letter or letters of the alphabet.

Tickler files sometimes prove useful to the general practitioner as well as to the specialist. A tickler file is a tray of cards which is consulted at the beginning of each professional day as a "tickler" or reminder of things

to be done on that day, the more

NEO-REARGON "A GONOCIDE OF MERIT"

ELIMINATES GONOCOCCI QUICKLY PAINLESSLY and WITHOUT IRRITATION

Write for literature

AKATOS, Inc., 114 Liberty St., New York

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"Between-Meals" Refreshment

Too little attention generally is given to what the child eats between meals. Often it is some food lacking in nourishment, which only serves to spoil the appetite for nutritive food.

The delicious Swiss food-drink—Ovaltine—supplies that between-meal refreshment which the growing child demands, and at the same time actually aids in the digestion of other foods.

Ovaltine is more than a refreshing, palatable drink—it is rich in vitamins and mineral elements. That is why it is proving so valuable in the diets of undernourished and underweight youngsters.

Why not try a cup of hot Ovaltine yourself, after a strenuous day in the office? Then you will understand why it is gaining such favor among physicians and hospitals.

Offer good only once unless in special cases and limited to medical and allied professions.

OVALTINE

The Swiss Food Drink-

Manufactured under License in U.S.A. according to original Swiss Formula.

THE WANDER COMPANY, 180 No. Michigan Avenue, Chicago, Ill.

Dept. M.E. 2

Please send me regular size package of Ovaltine, FREE.

Dr.

Home Address

City_

State

important appointments to be kept, and the like. Guide cards are supplied for days 1 to 31, if needed, and of course for each month of the year. An item due for attention on the 17th is noted and filed behind the guide carrying the number "17." It will then come up in due course as a jog to the memory.

The technique of collecting doctors' bills requires for its suitable explanation more space than is available in this article. It must serve at this time merely to say that it is not only unfair but definitely unsafe to delegate the responsibility of collections wholly to the young lady in the outer office. It is safe to say that in most cases she is no more expert in the matter than you are. In justice to your own finances you can hardly afford to do less than become familiar with the principles of successful medical collection. This involves a knowledge of at least the rudiments of medical collection procedure, together with a working mastery of the simple principles of psychology which are involved.

From the viewpoint of bookkeeping, which we have defined as "income-outgo control," the most important single piece of furniture in the office is the filing cabinet. This should be preferably of metal and should vary in size in accordance with the volume of the practice. It should be provided with spaces as follows:

1. An easily sliding drawer for the filing of normal correspondence letterheads and carbon copies, size 8½" x 11".

2. Four drawers, each to hold 4" x 6" cards, or a size larger or smaller if preferred. The 4" x 6" is on the whole the most practical and useful. It is always possible, in the event that you want more space for recording case histories, to use a double-card with the fold at the top (see Figures IV and V).

Of the four drawers, sized 4" x 6" capacity, one is used for the Active File, one for the Unpaid Accounts, and the other two will gradually fill with Case Histories for ready reference. To keep these records in good order, it is ordinarily necessary to hire a girl to work the equivalent of about two hours a day as a probable minimum, many practices naturally requiring one or more full-time girls.

It will probably never be possible to identify and give the proper weight to the precise factors that make members of the medical profession successful. Someone, identity unknown, once identified the factors of success in the medical profession as ability, energy, the girl in the

WE INVITE YOU TO USE THIS COUPON-TODAY

Return mail will bring—FREE—a full size bottle of FITCHMUL—a Physician's Prescription for a BRONCHIAL SEDATIVE

EXPECTORANT—VEHICLE in use, the country over for more than a 1/2 century.

It's outstanding value is assured by its formula as follows—Canadian Fir Balsam, Venice Turpentine, Chlorie Ether, Hydrocyanic Acid (minute quantity), Tartar Emetic, Aromatica.

A. PERLEY FITCH CO., Concord, N. H. Mail FITCHMUL to the following:

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DEPRESSION of the METATARSAL ARCH

—this painful condition, frequent among women, can be relieved and corrected.

A breaking down of the anterior metatarsal arch is usually indicated by neuralgic pains in the feet, burning sensation under the toes, callouses and general tenderness of the ball of the foot.

As an effective means of correction, we recommend Dr. Scholl's Anterior Metatarsal Arch Support. This can be supplied to



Pain, Callouses, Tenderness and Cramps where finger points indicate a weakened condition of transverse arch.



This Support is especially designed to fit close to the heads of the metatarsal bones and provide the needed support.

meet the exact requirements of a patient's particular condition, and adjusted as improvement progresses.

Any shoe or department store which features Dr. Scholl's Foot Comfort Service can offer you expert cooperation in Pedo-graphing the feet and fitting the necessary corrective appliances.

For a complete discussion of foot troubles and their treatments, write for Dr. Scholl's book "Foot Weaknesses and Correction for the Physician." Coupon below is for your convenience.

THE SCHOLL MFG. CO., Inc., 213 W. Schiller St., Chicago 62 West 14th Street, New York City

Please send me your book, "Foot Weaknesses and their Correction for the Physician", and name and address of nearest Service Dealer.

Address State...... State......

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outer office, location, and business methods. So far the doctor would doubtless agree without demur.

But the same unknown individual was also so bold as to weight each of these factors with the following percentages: 10% of success depends upon ability, 15% upon energy, 15% upon the girl in the outer office, 20% upon location, and 40% upon business methods, giving a hundred per cent total!

I do not subscribe to these figures. Nor would many reputable practitioners subscribe to them. Yet from the success of some of the quacks who are the common foes of us all, there would seem to be enough truth in these percentages to give us all pause. For quacks, with no ability whatever, too often make a financial success of their operations, to the harm of the public and the chagrin of the reputable medical man. The quack operates surprisingly well on the last four factors alone.

The conclusion is unavoidable. I am convinced, from the evidence that has come to me in talking with doctors who have consulted me on administrative problems, that in the average office there is wide room for improvement in handling the business end of the medical profession. In the current era, the call for that improvement is swelling into a roar.

Income Tax

[FROM PAGE 73] man with one dependent, and with an income of \$5,000, will pay, under our Treasury's proposal, \$31.50 in taxes; a man similarly situated in Great Britain pays, under Mr. Snowden's latest budget proposals, \$650. A man with an income of \$10,000 pays \$153 in the United States and \$1,800 in Great Britain. One with \$100,000 pays \$22,030 in the United States and \$48,000 in Great Britain.

We would grant an exemption of \$1,000 for a single man, \$2,500 for a married man and \$400 for each dependent. Great Britain's exemptions are as follows: For a single man, \$485; for a married man, \$730; for the first dependent child, \$245; and for each other child, \$195.

If our program is adopted, it is estimated that we shall obtain during the full fiscal year 1933, an additional \$60,000,000 from corporations, \$185,000,000 from individual income taxpayers, \$11,000,000 additional from estates, and \$514,000,000 additional from miscellaneous internal revenue taxes.

When we come to the miscellaneous group, the rates are not so high as to interfere with the flow of goods or services, or to constitute a real burden on those

CITRIN CAPSULES

(REGISTERED TRADE MARK

INDICATED in the treatment of High Blood Pressure.

NATURE OF DRUG: A Glucoside from Watermelon seed.

PHYSIOLOGICAL PROPERTIES: A vasodilator slow in action, prolonged in effect. Non-toxic, non-cumulative and shows no tolerance.

TABLE ROCK LABORATORIES, Inc. Greenville, S. C., U. S. A.

Literature will be sent on the Physician's request.

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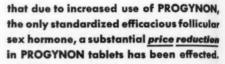
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SCHERING ANNOUNCES



The increased demand has caused us to organize our source of supplies, facilitating production. This economy of production and wider distribution permits us to pass on savings to you and your patients.

PROGYNON has proved its usefulness clinically in amenorrhea, menopausal disorders, frigidity, ovarian dysfunctions and the nausea and vomiting of pregnancy.

The new price of \$3.00 for a bottle of 30 PROGYNON tablets—at least a month's supply for the average case—makes it available to a wider group of patients.



VALUABLE MONOGRAPH

A monograph containing over 500 case histories is available without charge or obligation if requested on your prescription blank.

Compare these retailing selling prices:

			Former	Present
Bottle	30	tablets	\$4.50	\$3.00
Bottle	60	tablets	8.20	5.50

---- ATTACH PRESCRIPTION BLANK TO THIS COUPON -----

Schoring Corporation, 110 William Stroot, New York:

Please send me without obligation, monograph and full information regarding PROGYNON

Name

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who buy or enjoy them. Can we seriously complain if cigarettes and radios and admissions to places of amusements—yes, even semi-necessities such as automobiles—are to cost a trifle more, or if we are to pay 2 cents for the privilege of using checks and an additional cent on transfer of securities? These are not intolerable burdens, particularly when we are asked to assume them to meet the necessities of a real emergency.

But, let me add that if the people of the United States make this sacrifice and furnish almost a billion dollars of additional funds to their Government, they have the right to insist, and I hope that they will, that not one penny is expended extravagantly, politically, or unwisely, but that just as enforced rigid economy prevails throughout the country, so it will be observed in Washington.

And WE Laugh, Tool

[FROM PAGE 52] for a doctor's wife? No, it is not professional courtesy you complain of—quite the contrary!

All in all then, doesn't it resolve itself into a definition of professional courtesy? There may be many definitions, so why not accept one for our purpose. Let professional courtesy be the free interchange of the courtesies between doctors. This will immediately eliminate any special services, and by special services I do not mean only the services of

specialists. I include also prolonged and arduous services rendered a professional friend and

his family.

Why not be reasonable and charge, and expect and insist on paying a definite professional fee? It may be the full fee for such services, or it may be scaled in proportion to the doctor's income. But paid it should be—not an honorarium in the form of a Christmas present. This accepted, you and your husband need have no hesitancy in availing yourselves of the services of anyone on earth, Harley Street specialists or your next door neighbor. In this hard-boiled world, one gets what one pays for.

one gets what one pays for.

I am tempted to continue and expatiate further on what at present comprises my courtesy list. First are ministers and their families. Many ministers are wealthier men than I am, and I have attended several. I have never rendered a bill, have never been asked for one, and have

Use BROMO ADONIS

A Bromide Sedative

in DISEASES of the NERVOUS SYSTEM

Bromo Adonis No. 1

When symptoms of nervous irritability make their appearance, as in Hysteria — Nervous Indigestion — the Menopause—Insomnia, and as an adjunct in Petit Mal Epilepsy.

Bromo Adonis No. 2

Where a more lasting sedation is indicated, as in Epilepsy, especially in idiopathic cases which have become chronic. It is superior to plain bromides.

Check the preparation desired, for free sample.

TUCKER PHARMACAL CO. 221 E. 38th St., New York, N. Y.

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never received a thank-you note. I have even attended a minister's daughter, who during the week I discharged her from my care, married a man with more income than I ever hope to have capital. But at the time she was my patient she was a minister's daugh-

Nurses comprise another class who give rise to my merriment. I have attended several, and they have behaved as free patients usually do. On the other hand I have employed the service of several for myself and my family and have paid their full charges.

On the other hand, I am delighted with my dentist patients. I charge them exactly as they charge me, 66% of the regular

charges.

The last really offers a constructive suggestion. Why not in every case, with the possible exception of those instances which are really examples of reciprocal professional courtesy, should not doctors charge, and expect to be charged, a fee whose exact relationship with a normal fee can be easily agreed upon? I say proportionate fee because by making it only a proportion, we still make our obeisances to that ancient heirloom, professional courtesy.

One more word before I stop. The story is told how Dr. Weir Mitchell extended his courtesy. It happened that a certain rather pompous bishop was taking leave of Dr. Mitchell without happening to bring up the question of remuneration.

A remark at the door made him pause. "And about my fee?" said

Dr. Mitchell.

"But, doctor," the bishop replied, rather surprised, "I was under the impression that you did not render bills to clergymen."

"Yes." said Dr. Mitchell. "but I prefer to extend that courtesy

of my own volition."

AM hurt and indignant since reading the article "When His Patients Call Him He Goes." The accusations hurled at our doctors in this article are unjust and untrue, according to my experiences as a doctor's wife.

The doctor as a husband is not a heartless wretch interested only in pay patients. The doctors of my acquaintance give their best efforts to their loved ones; that is the way I have found it.

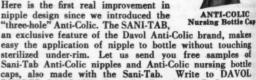
As to the question of a doctor's attitude toward treating the wives and children of other doctors, contrary to the author's grumblings in the December article, I have encountered nothing but wholesome courtesy and a sincere desire to give their best when it has been necessary for other doctors to lend me their services.

Best wishes for much vigor to your very useful magazine.

Mrs. P. N. Cheatham.

INSPECT THIS NEW STYLE "ANTI-COLIC" BRAND NIPPLE. Samples sent free on request.

SANI-TAB



RUBBER COMPANY, Dept. B2, Providence, R. I.

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Literature and Samples »

SAMPLES OF BABYPADS: A fullsize package of 50 Babypads, a new sanitary diaper lining, which is discarded upon soiling, is offered physicians by: Dennison Manufacturing Co., (ME Item 2.22) Framingham, Mass.

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NUTRITION AND DENTAL DIS-ORDERS: There are some pertinent and usful facts in this paper by Milton fleedore Hanke, Ph.D., which is offered in reprint form, with illustrations and charts, by: California Fruit Growers Exchange, (ME Item 2-32), Los Angeles, Cal.

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Give the Patient His Way?

[FROM PAGE 21] and with the honest belief that such empiric treatment was indicated?

With many people, a faith in these "old time remedies" is inborn and as strong as their inherited faith in the Old Time Religion. In cases where they think these measures to be indicated they will resent the interdiction of their use.

They frequently realize that such measures are not self-sufficient; otherwise they would not

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Sample and literature on request to the profession only.



call the doctor. But they do consider them as being valuable adjuncts in treatment, and unless the physician thinks that they might prove to be definitely harmful and for that reason contraindicated, there is no reason why their use should not be allowed to continue along with the doctor's prescribed course of treatment.

This will at least give the patient and his friends the satisfaction of thinking that, while the physician is doing his part, they are doing all that lies within their power. If, after this course of action has been permitted, the patient should not recover, the doctor will not be blamed for refusing to permit treatment which relatives and friends think might have caused a more favorable outcome. In case of happy recovery, the question as to where credit will be given should never enter the doctor's mind.

In the community where I am engaged in practice, people in the rural sections have an unbounded faith in the efficacy of tar plasters in all acute affections of the chest. These plasters are applied at the first indication of a "chest cold"; then if the patient does not get well, a physician is called. When he arrives he invariably finds his patient wrapped in one of these tar jackets. There is no question about it being a dirty, sticky, smelly mess.

One physician, who formerly practiced in this community, seemed to have a hatred for tar plasters that was almost equal to the Devil's proverbial hatred for Holy Water. Whenever he would be called and would find the patient wrapped in one of these contraptions, he would be sure to lose control of his temper and forthwith vent his wrath by hurling the offending plaster into the open fire. [TURN THE PAGE]



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A bright flame, shooting up the chimney, was all that would ever come of his fury, for so soon as he had left, the neighbor women would proceed to prepare and apply a fresh poultice, in the mean-while disparaging the doctor's new-fangled methods of treatment. Eventually this physician sequired the unenviable reputa-tion of "not being very good in

pneumonia.'

If the physician thinks any of these homely measures to be con-traindicated in a given case, it is his duty to dispense with them, but he can do this without causing resentment or any loss of restige if he will take the trouble to state the reason for his action. Nevertheless, it is always well to consider any suggestion offered, irrespective of its source, and it is never well to dismiss a suggestion with a haughty air of superiority that will tend humiliate or cause chagrin.

Let the doctor remember that scientific medicine had its inception in empiricism, from which it is not yet entirely divorced. Furthermore, he cannot refuse to admit that certain household measures of treatment do, on oc-casion, possess a grain of virtue even though their virtue may rest entirely on their psychologi-cal effect! This effect is often considerable, for the ideas pertaining to the use of these measures have been grounded in the minds of these people for gener-

ations, and they cannot put them lightly aside, and they will not be able to put them aside until they have been educated to a higher scientific standard, which will require several more generations.

However, when the doctor is called to see Johnny Jones who has a stomach-ache, and Johnny's mother insists on a brisk dose of Castor Oil—both Johnny and the doctor will be fortunate if she has not already given it to himan emphatic and uncompromising decision to the contrary should be made, but even in such cases. a few words of explanation will be highly appreciated.

It was Aaron Burr, if we remember correctly, who claimed that all explanations were futile, as a man's friends did not require an explanation and his enemies would not believe him if he did explain. But then, let it be remembered that Aaron Burr's field of activity was not the prac-

tice of medicine.

The physician frequently encounters people who are very strong in their pet likes and pet aversions. Some will state that they cannot swallow a pill or a capsule but that they can take a liquid or a powder. Is there any real reason why, in the ma-jority of these cases, the doctor cannot write the prescription so as to order the medicine in the

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form which the patient will find to be the least objectionable?

In prescribing any treatment for children, of course, the doctor does not consult their wishes other than to avoid giving them bad tasting medicine if he finds if possible to do so, but adult patients, in full possession of their mental faculties, should not be forced or coerced. Human na-ture is such that it instinctively rebels against compulsion and an appeal to reason will often accomplish more. However, in dealing with an obdurate, headstrong individual, the doctor will have to mursue whatever course of action he occasion demands.

Not so long ago, in visiting a female patient, I had occasion to

prescribe a dose of Epsom salts.
"Doctor," said the patient, "if
you say that I should take salts shall do my best, but salts always make me so sick and I have o vomit it. If you could pre-cribe something else that you think would do as well, I would certainly appreciate it."

I could prescribe something else, and did.

Later, the same day, I chanced to prescribe Epsom salts for a rough, obstreperous farmer.

"Salts!" he thundered. "I won't

take salts for any man living!"
"All right," was the reply he received, "take it or leave it. You are the sick man. I am advising you what to do and you are pay-ing me for that advice."

The nurse reported that he

took his salts.

The physician is responsible for the management of a case of sickness and for whatever measures are employed in the sick room. He is the judge from whose verdict there is no appeal; then let his judgment be tempered with consideration for the wishes and feelings of the patient and of all who have any



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Clinical Tests show how Yeast*improves Skin"Tone

Newly-discovered "self-disinfecting" power of the skin shown in rate of destruction of test micro-organisms (Staphylococcus aureus) on a portion of its surface before and after Fleischmann's Yeast was added to the patient's diet.

IMPORTANT researches have revealed a very interesting property of human skin—its ability

to destroy bacteria upon its surface. When the skin is clean and healthy,

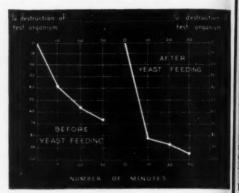
When the skin is clean and healthy, up to 95% of test micro-organisms are rendered non-viable within 10 minutes, these experiments show.

When the skin is unhealthy or injured, however, bacteria on its surface are destroyed much more slowly. In such cases, the self-disinfecting power of the skin can be rapidly increased by adding Fleischmann's Yeast to the diet.

The chart above illustrates this marked improvement in skin "tone" in a typical case of furunculosis of two years' standing.

*Fresh Fleischmann's Yeast was used in these erperiments. It is the only yeast rich in three vitamins—vitamins B, G and D.





Before yeast feeding began, less than 70% of test bacteria applied to the infected area were destroyed by the skin within 30 minutes. After the days of yeast feeding over 90% were destroyed in the same period of time.

For years Fleischmann's Yeat has been known for its unusual value in correcting common types of skin disorders. It induces a markel leucocytosis. In the intestines it gently stimulates peristalsis and checks abnormal putrefaction.

You will find Fleischmann's Yeasteffer tive in many cases where other forms of treatment have failed. Just recommend 3 cakes a day. Directions are on the label

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2

interest within that sick room.

Let him permit the patient and the patient's friends to have their say in so far as he can do so without endangering the patient, hindering the progress of the asse, or compromising his own position. By the very nature of things, in the sick man's world, the doctor is King. It does not meessarily follow that he must a Despot.

A Doctor Looks at Lawyers

FROM PAGE 19] stone, until he had that a case somewhat rebiling that of his client was decided at just about the time factor was a pup.

Then the lawyer goes out and plays golf. There is no use doing more research for he has found

a precedent.

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To be sure the world has undergone a countless number of complete transformations since an English jurist of forgotten repute acted in the case on which he is to rely. That matters not a bit, for the more we look on lawyers the more we observe how lovingly they caress and nurture what they call a precedent; the more ancient it is the more reverence they bestow!

There is only one thing in a lawyer's world that takes precedence over a precedent and that is a law which he himself has had a hand in making. For as we look at lawyers, the truth stands out in fulsome fatuousness that they think they should make the laws as well as admin-

ister them.

At the last session of Congress, the Senate and House of Representatives had a combined membership of 531. Of this number 356 were lawyers. Now, Congress is the lawmaking body in



HERE IS ONE OF THE ADVERTISEMENTS OF THE SUGAR INSTITUTE

The advertisement reproduced here is one of the series appearing in publications throughout the country. In order to keep the statements in accord with modern medical practice, they have been submitted to and approved by some of the leading authorities in the field of human nutrition in the United States. The Sugar Institute, 129 Front Street, New York.

An Aid in Reducing High Blood Pressure

INTESTINAL toxemia is frequently met with in cases of hyperpiesis. This toxic condition reduces the capacity of the liver to anabolize certain nitrogenous wastes and the resulting accumulation raises blood pressure.

When hyperpiesis exists in these cases, patients may have few manifestations usually associated with it. All, however, have one common characteristic—constipation—which is the cause of the toxemia.

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these United States. Its members one the fact that they are members to the insistence and persistence which they adopted in senting their election. In other words, these men personally sought the job of making laws for all the people. The colossal nerve of them!

Furthermore, these lawyer lawmakers delight in making special privilege laws for their persmal benefit. Last year they had
the affrontery to enact a provision which exempts automobiles
bearing "Congressional tags"
from compliance with parking

These 356 lawyers claim to have been "called" to the Halls of Congress, which is all bosh, for the simple fact is that they talked their way into the National Legislature.

When admitted to practice these fellows made the same daim; announcing that they had been "called to the bar." The plain truth is that they did the "calling." They clamored and yelped at the doors of admissions committees until the portals were opened just enough to let them enter the sacred precincts.

Lawyers who cannot become legislators have another channel through which to become lawmakers. This is by being elected or appointed to a judgeship. We have in American jurisprudence a hybrid line of authorities called "judge-made law." Some judges, who probably as lawyers craved the chance to enact legislation, find that this desire may be gratified when they are on the bench. Regardless of what other courts, or other members of their own court, have done, these men take the bull by the horns and decide cases according to their own dictates; and such decisions stand as the law until knocked into smithereens by other lawyers sitting as judges in a higher tribunal. If you keep looking at

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lawyers long enough you will see how thoroughly and completely they have taken charge of both lawmaking and the administration of the law.

Another thing. Some people may think that with the naked eye and looking straight ahead they can get a fair view of law-yers. Any one who has such an idea is mightily mistaken. One has to squint and look sidewise and frequently use a microscope when looking at lawyers. Also, one has to be on the move, for lawyers never stay put. That is one reason why we have motion picture cameras. A lawyer in still photograph is a saint as compared with the same man taken on fifty feet of film.

Take a look at a lawyer when he is asked a legal question. He reaches for his books or, more often, tells the client to return next week, and then mulls around in a library until he stumbles on an answer. A doctor, on the other hand, must speak out. Patients expect physicians to carry some professional knowledge in their heads, and the laity enthuses very little over the medical adviser who turns at once to books. If a patient has smallpox, the doctor can't tell him to go off and come back next week.

After all that I have observed and expressed, one may be inclined to ask why we should look at lawyers. I confess a sympathetic attitude toward that question. In fact it may be that my time would have been better spent had I been enjoying a good movie.

It is probable that I gave lawyers the once over because they strutted out in my line of vision. They are apt to do that for modesty is one of the hidden virties of members of the bar. The time has not been wasted, however, for the more I look at lawres the more I thank good fortune that my diploma reads Doctor of Medicine.



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Crossing Lethe's Stream

[FROM PAGE 23] ing, and sloping at the sides to a crater, from which there was a forcible eruption. I had vomited. I recall only the mechanical action; there was nothing disagreeable about itno involvement of the senses of taste or smell, no nausea; in fact, I thought, in a very befogged fashion, "Why, this is not bad at all," and lapsed into oblivion.

Then began a strange emergence, and a very wierd mental reaction toward it. I felt as if I were passing through an evolution, each stage of which, once accomplished, was forever forgot-ten, by both the nurse and me, and lost forever to the Experience of the World.

"I wonder," my brain would think, "if this will be the real one, the state at which we'll arrive and be known again as alive?"

And then once more would the flood of forgetfulness roll over me and I would realize—quite complacently-that my nurse and I were again relegated to the Cimmerian darkness of the shadows.

A dull ache in my knee prompted me to open my eyes. How bleared the ceiling light looked. It was the one in my room. I must be downstairs again. Impossible that I should remember nothing that went on during the operation.

Again the ache in my knee. I turned my eyes languidly towards the nurse standing at my side. She looked as impassive as a Murillo madonna bending toward me out of limbo. In some such nebulous fashion did Solvej appear in the cloud. Still the ache A long sigh, and in my knee. when I opened my eyes again the ceiling light was more clear.

"Aha!", thought I, with the pleasure of the discoverer. "Oxygen replaces the lipoids in the nervous system"-and I took sev-

eral long breaths.

Things were now quite clear; I had arrived at Henley's "mild, complacent dreamery." I looked again at my nurse and smiled.

"Well, how do you feel?" she asked as she held my wrist. "Not half bad," I drawled

drunkenly, "it was really a mos' int'res'ing 'xper'nce"—and so it

Second Start

[FROM PAGE 25] ter five years, I found myself with a growing list of growing patients. One evening I decided to attend a neighborhood citizens' meeting which was scheduled to consider something in which I felt an interest. It was

Micajah's Medicated Wafers

are prolonged in action. Easy to use. Superior to vaginal douche and fountain syringe. Successfully employed by physicians in cases of hypersecretion, relaxation, irritations of vaginal tract, and

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Convince yourself it is free from caffein effect

PROBABLY you have long sought a beverage that is free from caffein effect, yet which has coffee's ageold power to satisfy.

If so, then your search is at an end. If you are a doctor, send the coupon below for the free quarter-pound of Sanka Coffee—genuine, delicious coffee free from caffein effect.

When it arrives, make the nighttest—drink your first cup of Sanka Coffee at night. Next morning you'll know, from actual experience, that it can be enjoyed without causing sleeplessness, indigestion or nervousness. You'll also know that the delicious flavor and aroma of Sanka Coffee will remove any temptation to drink caffein-containing coffee. Sanka Coffee is real coffee—a superior blend of the choicest Cen-

superior blend of the choicest Central and South American coffees. It is rich and satisfying in flavor—tempting in aroma.

Sanka Coffee has been accepted by the Committee on Foods of the American Medical Association with the statement: "Is free from caffein effect and can be used when other coffee has been forbidden".

Send the coupon below for a free quarter-pound of Sanka Coffee. With it we shall be glad to send a copy of "The Passing of 'Thou Shalt Not'"—a more complete discussion of Sanka Coffee.

■ 1932, S. C. CORP,

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to be my first appearance at a meeting of this character. At the appointed time I strolled over to the school house, where the meeting was to be held. As I entered the vestibule, I heard voices, and was somewhat startled to hear

my own name called.

"I could not do otherwise than to pause and listen. There seemed to be some sort of caucus in advance of the meeting, and my name had been suggested for membership on an important committee-a committe concerned with matters other than medical. At first I felt flattered. Suddenly I heard the sharp voice of a prominent banker suggesting a switch for the committee membership from me to my professional competitor. He gave his reasons, too. He said I was pretty well steeped in my profession, had little to do with any other activities, and probably knew very little about the particular business with which the committee was to be concerned. followed other expressions similar import.

"All seemed to agree that, outside of medicine, I was a first class numb-skull. The concensus of opinion seemed to be that while I might be a good doctor, I was All were a very dumb citizen. likewise agreed that my competitor was not only a whale of a doctor, but also a very good fel-low and smart enough to take a part in the governmental affairs

of the community.

"I was so chagrined that I slipped out, unobserved, and went back to my office. The full force of the blow I had received did not immediately fall on me. first I was disappointed only in the low estimate of my neighbors as to my general business ability. When this wore off a bit, I began to take stock of myself. The in-Kindly write on professional stationery to to take stock of myself. evitable comparisons followed.

"This other doctor who had with seemed so popular neighbors had been in practice



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Inspections by rhinologists hours after application prove that these ointments, motivated by the pressure and direction of the breathing process, creep upward into and cling to higher post-nasal orifices. This spreading tendency is promoted by constant regulation of the melting point and specific gravity of both V-E-M and its ephedrine-containing counterpart ZYL. Greater protection is afforded both because of the continued emollient effect of an ointment kept in contact with in-flamed mucous membrane and because constant washing of the membranes by solution is not necessary to deposit medication.

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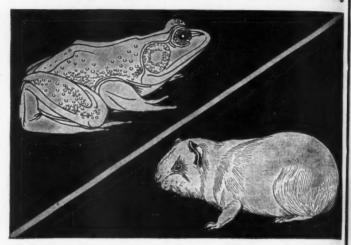
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Each capsule contains one grain of powdered Digitalis Leaves, (fat-free), tested and check—tested as above and standardized to the United States Pharmacopoeia. The "McNeil" black capsule prevents decomposition from light and protects the ingredients from atmospheric conditions. spheric conditions.

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only a year or two longer than had I. Our professional standings, were, it seemed to me, about on a par. But he lived in a beautiful new, modern house, that must have cost about \$35,000, while I lived in the same apartment that

"He visited his patients in an expensive coupe which always emed to be new and had his amily driven about in a limouine by a liveried chauffeur, while I made my calls in the family car of well known, but low-priced

nake.

"He was a director in the new bank in which I made my modest deposits. He belonged to two country clubs and an exclusive lown-town business club, while I felt barely able to pay my dues in the more popular City Club, with privileges at an almost defunct country club. He was popular with all classes. I had a cer-tain popularily in a limited circle of friends and with my own pa-

He was accumulating a tients. generous competence. I was mak-

ing a 'good living'.

"I concluded then and there that I was not making a success. I ticketed myself as a sort of successful failure. I knew I was doing some good work. Had my work not been up to par, I should have stayed right there and congratulated myself. But the very fact that I was doing good work made the pill I was compelled to swallow all the bitterer. that, through errors I had made. I and my family were deprived of the legitimate fruits of my labors and the public was missing the service which I was able to render.

"I also conluded that it would be futile to attempt a change of tactics. My status was fixed as far as my present practice was concerned. So I decided to move, and to do so at once. Since my troubles did not lie in the community, but were wholly confined

SATURATED SULPHUR-BEARING LAXATIVE"



Toxic putrefactive bowel products are the chief impediments to natural and artificial therapeutic measures. Their removal and detoxication is the function of Occy-CRYSTINE.

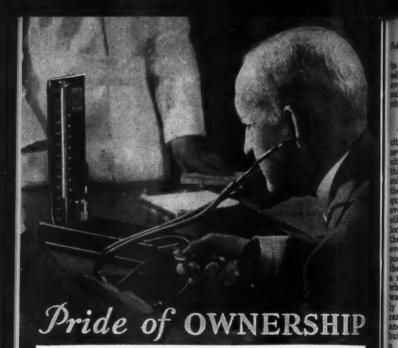
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my own actions, I could see no dvantage in a distant move. I en considered going to another hurban community in the same

"There was, however, another eity of about the same size only venty-five miles away. The two ities were very much alike. To his city I went, and found a aburban location very much like the one I proposed leaving. Inmiry disclosed that it was not wer-run with doctors, and that other conditions were good. In looking about, I learned that there had recently been a fight wer the location of the branch ost-office, with the result that he Government had constructed new building, leaving the erstwhile post office building, which was the most prominent and costbuilding in the community, vacant and on the hands of an irate disappointed owner. uilding was recommend to me as possible office location, and I ras thrown in touch with him. He at first refused to consider renting any part of the building, but it developed that he was about to leave on a year's European trip, and was anxious to ispose of the property.

"I presume my determination to be friendly, and to take part in affairs outside of medicine, made me talk to him about his roblem. At any rate, after a day of friendly negotiation, I entered into a contract under which I leased the upper floor for both office and residence, with an option to buy the entire property, the option expiring in one year. I also agreed to supervise the leasing of the two rooms with street frontage on the ground floor. Thus I actually became the manager, and virtually, for the year at least, the owner of the most prominent building in the

business section.

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"I went back home to close up my business and get ready to move. When, two weeks later, I

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Increasingly Successful in Symptomatic Treatment of

HYPERTENSION

To prevent the blood pressure from rising to dangerous levels.

To reduce the blood pressure to a point of safety, when it is at a very high level.

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Mrs. Mc. 68 years, Chronic Nephritis with Hypertension. Blood pressure before 210/132, One PULVOID Q.3.H. with diet. lat week, 190/100; 2nd week, 176/92; 3rd week, 180/98; 4th week, 172/100.

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I DEG U.S PAT OFF. (Enteric. sugar-coated. green color)

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turned to the new location, I and that the owner of the buildhad announced my lease and Both the neighborhood kly and the big city dailies d played up the story as one the really important real este transactions of the season. was described as a successful vsician of many years practice the nearby city, and one of the for sasons given move. my oubtless originating in the costing spirit which I afterward onbtless arned about, was that I would ave a better opportunity for the evestment of my surplus funds. was heralded as not only a deirable addition to the city's pro-fessional forces, but also as a onstructive builder and an important factor in civic affairs. Apparently I had achieved more prominence before starting in the w place than five years of acwe practice had given me in the

d.
I arrived at my new location

on Tuesday, shipping my household goods and office furniture overland by truck. The rooms for office and residence had been refinished and made ready, so the big truck backed right up, ready for business. About an hour after we started to unload, someone asked for me. It was my first professional call in the new place.

"Before we were fully settled, I received an invitation to attend a meeting of the business men of our section. Remembering my resolve, I decided to accept, and promptly mailed the requested post-card. At the scheduled time and place, I arrived, right on the dot. There were some fifteen men present, and I was cordially received and introduced as the new doctor and owner of the old post office building. I soon learned that the meeting was called to consider holding a street fair, designed to stimulate business and advertise our community.

TURN THE PAGE

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THIS double salt of iodine and mercury is one of the most efficient germicides known. It exceeds both iodine and bichloride of mercury in bactericidal potency, is of comparatively low toxicity, is non-irritative, and forms no insoluble combinations with proteins.

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BECAUSE Haley's M-O is a permanent emulsion of those two established correctives-milk of nesia and mineral oil -it may be considered doubly effective in the treatment of digestive disorders.

In this single emulsion are united antacid. laxative and lubricant. Together they correct acidity and regulate bowel movement, without digestive disturbance or leakage.

Since it is nearly tasteless, and therefore easy to take, the doctor

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M-O is exceptional ne useful in spastic colwo stipation, intestinal stillinic sis and auto-infectiournis It also serves well jians gastro-intestinal hypent I acidity, sour stomacistric palpitation, heartburicity pyrosis, gastric or dunce. denal ulcer, intestin "I a indigestion, colititude ally hemorrhoids.

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"A discussion followed in which did not participate, and finally entributions were called hree of the leading merchants promptly subscribed \$200 each, while other subscriptions ran hown as low as \$10. In a bit of a anic, but keeping in mind my esolve to enter into all civic acivities, I choked out a subscripon for \$200. The announcement as received with hand-clapping, nd its effect was magical. I was ccepted, not merely as one of he group, as I had hoped, but as ne of the leaders. I have often whether ondered that ight not be the best investment ever made. It was probably was. "I changed my tactics, follow-

ag a course quite different from hat followed in the other city. took a lively interest in the afairs of others, and particularly prional he affairs of the community. We wow months after locating a tinal stinic for school children was ornaction method by the city. All physicals well ians were drafted for the work, il hype at I was placed in charge of our stomacistrict. This gave me wide puberous deface.

ntestin "I assumed a new, friendly atolitical toward my patients. I
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men, and learned to call the chilne, diterest in my work, which had
and fore been so largely a technical
infanterest, enormously increased,
aturiad to it was added a sort of huAn effan interest which gave me a
mon reat satisfaction.

rable "As I progressed, I began to alize the terrible mistake I had ade in my first five years of aley actice. I now knew that I was ever really in danger of becoming the blustering, blundering pe of doctor that had so impressed me in my youth, and had, ter, obsessed me. I discovered at there was nothing unprofesonal in friendliness. Instead of sing poise, I had gained a new mity that I had not known be-

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re. In my changed status, I and it much easier to uphold best traditions of my profes-

The balance of the story is sickly told. Business flowed into yoffice in a constantly widening ream. At the end of six months was actually so busy in handing my practice that I was able almost completely forget the ancial side of it. I employed a scretary. Her reports told me at I was doing more business ery week than I had done in busiest week in my former eation.

"I have been in the new locam seven years. I have a \$35,000 me. I have the most modern fice in the community. I have we automobiles. I am director in the bank and one trust company, the former in the city and the ter in our own section.

Tam not boasting about these ings, but am just telling them cause they are facts. I get much more satisfaction from my sense of accomplishment than I do from the accumulation of money and property. What I am most proud to relate is that I am serving just about the maximum number of patients that time and human strength will permit.

"I no longer have any false notions about dignity or professionalism. I am genuine, real, natural. I am just myself, giving at all times the best I have. I feel that I am now, indeed, a success.

"Oh, yes, and I own the old post- office building."

Wastebasket

[FROM PAGE 29] there in this circular mail matter is a lot of pure wheat to separate from the chaff. All of it is valuable for study,



Have You Read this Interesting, Abbreviated Treatise on

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We believe there are some points in this booklet that will be of interest to you, and suggest that you tear this out and clip it to your card or prescription blank for a complimentary copy, as well as for a professional sample of Cysto-Sedative.

Cysto-Sedative is a highly efficient therapeutic agent in the treatment of Cystitis, Prostatitis, Urethritis, Painful Micturition, etc.

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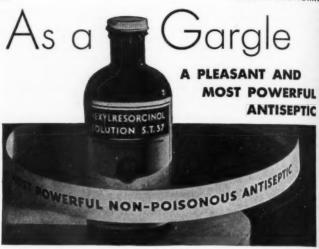
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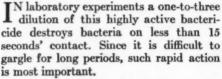
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And even though the patient should swallow large quantities of it, no harm results. For Hexylresorcinol Solution S. T. 77 is absolutely non-toxic.

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Hexylresorcinol Solution S. T. 37 diluted as a gargle or applied topically full strength exerts a powerful antiseptic action. Your druggist carries Hexylresorcinol Solution S. T. 37 in three- and twelve-ounce bottles.

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eause it is all "selling talk." omebody wants to sell us someting, and to do so they must resent their wares in an attractive dress; they must create in minds the desire to have that we tonsil snare, or that new salgesic. They must make us elieve we simply must have that mm; that we can't get along thout it; that their products

re superior to others.

By the same token, we must tain an active and a vigilant sales resistance." We do not ant some smooth-tongued salesan, or some cleverly printed ales talk" to unload on us some orthless mining stock, or some her item we do not need. kes study, much study and conant study, to separate that heat from the chaff. It also kes considerable time, unless e physician also cultivates the bility to evaluate swiftly and curately. We cannot do without capacious wastebasket; I work me overtime occasionally, but thing goes into that wastesket until it has run the gauntof swift, searching and interted scrutiny.

The observant doctor quickly and to know the progressive, to-date, worthwhile and reliamedical and surgical houses. Hen Eli Lilly, or Parke Davis d Company, or the Abbot Labutories, or Mead Johnson & Johnson & Johnson & Johnson & Company, or Mulford, or Hoffan La Roche, or Bauer & Black, E. R. Squibb, or Merck & Company, or Becton, Dickinson & Co., Johnson & Johnson, or General ettric, or H. G. Fischer Company, or Liebel-Flarsheim, or Vueller, or Meyrowitz, or Sharp Smith, or Wappler Electric—a hundred other first class and ogressive medical and surgical ms—send me literature—I ow they have a message that perhaps need and need badly is literature which is well tten, scientifically written, and

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Among the untoward symptoms associated with the climacteric is a frequent tendency toward excessive bleeding, which may or may not be malignant in origin.

To relieve bleeding and permit more extensive examination, Ceanothyn may be administered because of its wellknown effects on coagulation.

Ceanothyn offers a valuable non-toxic coagulant, which has the added advantage of convenient administration— Ceanothyn is given by mouth.

Dose: For acute hemorrhage give one tablespoonful of Ceanothyn every hour until controlled.

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Many thousand Mazon and Mazon Soap sample were sent physicians during the past year for clinical tests.

These clinical tests have substantiated our claim—expressed by authentic photographs and statements—concerning the distinctiveness of Manutreatment, making it acceptable to both physica and patient. Many interesting clinical reports at in our files—which we believe worthy of passin along to the Medical Profession:

"Some weeks ago you have been kind enough send me samples of Mazon Ointment and Son Gratified to state that the patient to whom it we given had Psoriasis of the scalp for 12 years. I day it is practically cleared."

Fremont, Wisc.

"The samples you sent me appear to be all y claim for it."

Miley, S. C.

"The first samples were used with immediate sults."

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"Your sample of Mazon and Mazon Soap he done wonders for a stubborn case of dandruft."

Johnson City, Tenn.

"for the past fifteen years has had eczema. I
tried everything. So far, with two samp
"Mazon" it has almost vanished."

North Haledon, N. J.

NOTE: Mazon Soap properly prepares to skin for the absorption of Mazon

Belmont	Laboratorie	s, Inc.
4430 Chesta	nut St., Philadelj	phia, Pa.

Gentlemen: Please send me trial supply of Mazon and Mazon Soap.

Dr.

Address

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with the latest and best information on that particular subject.

No literature from a well known house goes into my waste-basket unexamined; if important enough it is quickly scanned and then set aside for more leisurely study. If it is only an effort to sell me mining stock, or worth-less bonds, or a crooked collection service, I find it of value to study the "selling" talk employed. It takes a minute or so to scan; and unconsciously one is bound to absorb valuable professional information, as well as "selling" ammunition.

Perhaps the process may seem slow to the young doctor, but in due course he begins to somehow or other "sell" himself to The Public and before long he has a practice. It may take a decade or two before his practice has grown so that "Consultation by Appointment Only" is strictly observed; but with average ability, modern, up-to-date medical

and surgical knowledge, sound medical economics, and the broadly acquired "selling" ability acquired through close study of the selling efforts and methods of successful men and business houses all about you, success in medical practice cannot elude

your eager grasp.

Even the salesman at your door—try to take a minute to give him a pleasant smile and a hearty handshake. Find out what his "line" is. If it is something you are interested in, give him a few minutes in which to tell you. If it is something you are not interested in, tell him so frankly and firmly, but politely, and terminate the interview.

No mining stocks; no bonds today; but if the salesman wants to leave you a sample of his wares and a bit of literature take it gladly; perhaps you may locate gold before the wastebasket is reached.

Some of the men on the road



EPHEDRINE

now in a
New, Convenient Form
-- Quicker Results --

A new way of nasal medication which you and your patients will surely welcome.

EFRACOIDS contain ephedrins, hydrochloride, camphor, menthol, phenol and boric acid in a small NASULE with an elongated neck. Top of neck is simply clipped off and a part of contents of NASULE squeezed into each nostril. Easy to use. Convenient. Quick results.

EFRACOIDS provide the correct therapeutic aid in reducing congestion of the mucous membranes in head colds, asthma, hay fever and other inflammations of the nasopharyngeal tract. Send coupon for generous that he

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Gentlemen: Please send me a professional sample of EFRACOIDS.

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"What a pleasant way to get back my strength, Doctor"



Extra nourishment . . . without ing extra burden on the digestion

cans.

DOCTORS often say that in convalescence, one of the greatest problems is nutrition. High nutritive value, united with quick digestibility and assimilation, at once suggests But many patients dislike milk. Even those who detest plain milk, or who have no appetite, yield to the delicious, creamy chocolate smoothness of Cocomalt.

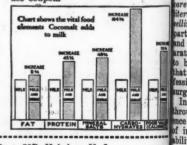
Far more important, however, Cocomalt actually adds 70% to the nutritive value of every glass or cup of milk. For Cocomalt is a scientifically balanced combination of milk proteins, milk minerals, converted cocoa, eggs, barley malt and sugar. Easily digestible, too.

For these reasons physicians are increasingly recommending Cocomalt in convalescence, in general debility, for expectant and nursing mothers, for prot growing children.

Cocomalt is sold in both grocery and drug stores in 1/2 lb., 1 lb. and 5 lb.

Free to Physicians

We should be glad to send you a trial of can of Cocomalt for testing. Simply use coupon.





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	Pl	ease	send	me,	withou	it cha	irge, a	tria	car	a of	Cocomalt.

Name Address

State.

are veritable walking mines of accurate, up-to-the-minute information on various lines of medicine and surgery; or they can tell you of some newer and better methods Doctor So-and-So is using so successfully.

Treat them like men and gentlemen; create and retain their good will even if their "selling" talk fails to get over. Of course, do not overdo the thing; but just because a caller says he represents Such-and-Such-a-House instead of desiring professional treatment, is no reason for abrupt and rude dismissal. They are trying to make a living in their calling just as you are in yours.

I go further than just rapid, accurate, intensive examination of all advertising matter coming to the office. Let me see something anywhere, in any medical journal or elsewhere, that offers possibility of newer and better service to my patients, and I promptly write my request for full literature.

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d 5 lb

malt.

Frankly I would like to be permanently on the mailing list be permanently on the mailing list used in the country. I do not were how heavy the barrage of iterature and "high pressured" relling talk. That is an important part of my practice, to rapidly and accurately evaluate, to separate the gold from the dross, to buy whatever I am able to that is newer and better in processional wares, medical and surgical.

In other words, I feel that brough close study of that Science and Art of Wastebasketry, of intensive development of the bility to rapidly and accurately file in my wastebasket only that which is entitled to such disposition, I am daily acquiring better professional knowledge and thus 'selling' myself to The Public in bigger and better way.

Thialion

is a dependable agent to prescribe in rheumatism, gouty conditions, biliousness, constipation and wherever there is evidence of acidemia or decreased alkalinity.

Literature on request

VASS CHEMICAL CO.

Danbury, Conn.



HEAD COLDS!

FREE TUBE—Rapid relief from head colds for your patients when you prescribe Efedron (Hart).

It produces powerful simultaneous decongestive, analgesic and antipathogenic action locally.

Send for Free Tube-TODAY

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Please send me free tube of Efedron.

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This Trade Mark Is More Than a Decoration.

The famous old symbol of Aesculapius which probable appears on every Kny-Scheerer Instrument does more place than identify the maker. It is positive assurance of and the finest available features in in-

strument design and manufacture.

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We would perform a service to physicians if we made our symbol so large that it could not possibly be overlooked. Unfor-

tunately this would not be practical, so we suggest that you lo for the Kny-Scheerer Trade Mark before purchasing any instrument Distributors of Kny-Scheerer Instruments are located in all lay cities. If your dealer cannot supply you, write us.

KNY-SCHEERER CORPORATION

580 Fifth Avenue, New York, N. Y.

OMICS

Speaking Frankly

NOM PAGE 7] relief, will practily cure themselves if given a fr chance: still we have to adthat the chief thing is, at beginning, a correct diagnosis. Let us consider his example of the woman who slips and breaks a small bone in her foot-"by skillful palpation he (the doctor) was readily able to decide that which probably there was a broken bone in her foot, without bony dismore placement. He strapped the foot, put the lady in bed for ten days, ce of and the injured member promptly got well. The cost was minimal. He had considered the pa-tient's purse."

If a bone is broken, will the foot be well with strapping and ten days in bed? And can skillful palpation always find a broken bone? If it does not, and the patient is told there is only a sprain, what will be said of the doctor, if after two weeks the foot is not well, and it then turns out that there was a fracture not discovered by the doctor? A suit for malpractice may well confront him.

Again, how often has it occurred, since the advent of x-ray, that a fracture of one of the long bones, the femur we will say, correctly diagnosed and treated without an x-ray and resulting in union and restoration of function, has later been x-rayed by another doctor, and because this shows slight over-riding, a suit for damages has been brought against the first doctor, in spite of the entire recovery of the patient? Medical literature is full of such cases.

Would it not be wiser in the case of the woman with a fracture of a small bone in the foot,

80 YEARS OF SERVICE

Some of our specialties that physicians are using with splendid results.

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Beginning in 1851, when Millard Fillmore was President of the United States, ten years before the Civil War and continuing for eighty years, EIMER & AMEND have been manufacturing and supplying the Medical Profession, throughout the country, with Medicines, Drugs, Chemicals and Laboratory Supplies. The name of EIMER & AMEND, on an article, during this period of time, has become a guarantee of purity, quality and reliability.

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RHEUMATIC



AT this season of the year with its recurrent crop of arthritic and heumatic sufferers, the physician anxiously seeks newer and more effective methods of relieving symptoms and, if possible, improving the condition itself.

Apparently Cinchophen and sodium salicylate remain the two staple antirheumatic agents, but unfortunately as ordinarily administered they offecertain objectionable features which interfere with their routine use.

Without changing the chemical composition of the drugs themselves, we have succeeded in combining them in a vehicle which renders them more seceptable to the patient as well as men effective.

This new form for a well established treatment is available under the name

CINSA-VESS

—a combination of cinchophen, 5 gr., sodium salicylate, 8 gr., colchicine, 1-200 gr., sodium bicarb., 33 gr., citric acid, 21 gr.

Cinsa-Vess presents an effervescent tablet which dissolves rapidly in water. Because of the effervescent character of the medium, the products are carried rapid into the intestines, with quick absorption. The alkaline character of the base side in combating the associated acidosis, usually encountered in arthritic condition.

Other Efferyescent Products manufactured by us are:

ASPIR-VESS, which contains 5 grains of aspirin in an effervescent alkaline medium.

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EFFERVESCENT PRODUCTS, Inc. ELKHART, IND.

BROMO-VESS

to have her sent to a hospital, have an x-ray taken and have her return home for treatment? The additional charge is very slight, and both the doctor and the patient are protected. Any doctor who neglects any reasonable aids to diagnosis, lays himself open to criticism and trouble, and is not giving his patient the best treatment.

A sincere desire on the part of the doctor to save his patient expense is seldom taken as an excuse for a mistake in diagnosis. Even when there is no mistake, he will often be accused later of carelessness. Unfortunately, many patients are only looking for an excuse to sue their doctors for damages, and a doctor must al-

ways protect himself.

By all means, let the doctor save his patient from undue expense wherever possible, but let him at the same time, make every effort to arrive early at a correct diagnosis and take a course which will protect himself from future criticism, and his patient from future trouble.

George H. Ryder, M.D.

Enterprise
To THE EDITOR:
Your little
monthly publication has a bright
enterprise to it that is very likable. Congratulations on what you
are doing.
D. M.

Courtesy To THE EDITOR: Have you ever thought of the life insurance companies' attitude toward physicians?

A company will have its agent write an application without medical examination. The applicant says Dr. Jones treated him for some well-known ailment, and that he was sick for six or seven weeks.

The insurance company theretion writes Dr. Jones for a diagnosis, report of the case, and so forth, but offers no fee for this service. Its letter to the physician reads: "As a courtesy to Mr. John Doe, who is an applicant



SANMETTO ...

It acts as adjuvant to other general measures of treatment. It interferes with none.

Dose: One to two teaspoonfuls.

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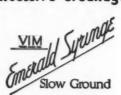
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- Accept this offer

"SLOW GRINDING" has upset old ideas about syringe accuracy and long life, and gives you an improved syringe that outlasts ordinary syringes as much as five times.

Rapid grinding sets up strains that later result in excessive breakage, leakage and backfire. "SLOW GRINDING" eliminates these

troubles.

- Accept this offer

We would like to have you try this new syringe at our risk. Try it ten days. Then if you are willing to part with it we will cancel the charge.

VIM Products are sold by Surgical Instrument Dealers

Just check the size you want to try and send this advertisement to you surgical instrument dealer, for a VIM "Slow Ground" Syringe to try.

2 c.c. Regular VIM Syringe @ \$1.25 5 c.c. Regular VIM Syringe @ \$2.00 10 c.c. Regular VIM Syringe @ \$2.50 20 c.c. Regular VIM Syringe @ \$3.00

MACGREGOR INSTRUMENT CO.

NEEDHAM, MASS.



for a policy in this company, we hope you will supply us with the necessary information."

The company gets the informa-tion from the M.D. practically the same as if an examination was made, but does not pay.

It is time to put this before the medical men so as to help whip the life companies back into line.

TO THE EDITOR: Epidemic I have been reading MEDICAL ECONOMICS for pears with pleasure and profit, and am taking this opportunity to thank you. Accept my hearty commendation for your efforts in the interest of the profession.

I have a local health problem. Diphtheria and scarlet fever are pidemic, quarantine and other reventive efforts being very lax. ne physician has publicly exressed doubt as to the safety nd efficacy of scarlet fever prod-

ucts as are now supplied by biological houses.

Will you furnish me for publication in the local paper an article dealing with the prevention, treatment, and control of these diseases, especially scarlet fever?

C. B. Cooper, M.D. [The Gorgas Memorial, 1331 G St., N. W., Washington, D. C., has a large assortment of materi-

al of this nature, and will undoubtedly be glad to supply it for such a purpose.]

TO THE EDITOR: Tolerance In the layman's eyes, every doctor is either an angel or a devil; every fault is overlooked or magnified according to the circumstance. Arbitrary judgment applies to medicine probably more than to any other profession.

This very fact in itself should be the means of purging our own ranks of prejudice and intoler-

Generous Sample of

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The Aseptic Mouth Wash, Gargle and Nasal Douche

Detergent Prophylactic Anti-Catarrhal Anti-Pruritic

> Send This Coupon for Free Sample

ORE THROAT

and all Membranous Affections

Mu-col assures surgical cleanliness of all membranous areas without the use of poisonous or irritating washes.

Mu-col is widely employed by thousands of physicians for Sore Throat, Catarrh, Oral Hygiene, Diphtheria, Tonsilitis, Feminine Hygiene, Dermatoses, etc.

Whenever a detergent wash of sufficient strength (without using corrosive coal tar or phenol) is required, Mu-col is now prescribed. Nearly 30 years of use have established it as a safe and dependable prophylactic.



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Please send me a Liberal Sample of Mu-col without cost or obligation.

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COLDS, INFLUENZA »



DUAL ATTACK

IN line with recent research which favors the association of alkalis with salicylates, the Wm. S. Merrell Company-pioneers in natural salicylate medication-have introduced

Alycin combines Merrell's Natural Salicylates with a balanced alkali.

Alycin provides a dual attack on colds, etc.—the natural salicylates help relieve the symptoms of pain and fever without gastric upset, while the balanced alkali combats the underlying acidosis quickly and safely.

For the same reasons Alycin is proving to be the medicament of choice in Rheumatism,

Arthritis and the Neuralgias.

Let us send you a full size container of Alycin so that you can make a thorough clinical test.

THE WM. S. MERRELL COMPANY CINCINNATI. U. S. A. ance. That we are so often judged arbitrarily by outsiders should make us all the more ready to avoid the folly of judging one

another arbitrarily.

which The petty jealousies exist in medicine are all born either of selfishness or of ignorance. Neither has any place in our profession. By building a Chinese wall of prejudice and intolerance around ourselves, we are not only limiting our opportunities to acquire knowledge through fellow contact, but we are repeating the mistake we are so quick to perceive in the public's attitude toward us.

Criticism aimed at the profession in general by the layman is not due to ignorance, commercialism, nor want of feeling for his fellowman, but to sheer Are we to be thoughtlessness. guilty of the same degree of thoughtlessness toward another? The fact that we are all in the same boat, tossed on the sea of public thought, should enourage mutual understanding.

Recently a physician wrote these golden words: "What we all the science of medicine is a most variable and unstable affair. constantly changing, and contantly to change. Today we are ustly proud of the body of scintific medicine. If we could live into the next generation we hould be ashamed of it."

With that thought firmly in aind, how can anyone be any-

hing but tolerant?

Let us remember this: We will rogress farther and faster on il than on carborundum, and also with less wear and tear. If we ourt the respect, esteem, and oyalty of our fellow-co-workers, s diligently as we court the avor of the public, our group ntelligence will shine more bril-iantly in the eyes of the world.

A. Pulford, M.D.

TO THE EDITOR: nsurance Practically all nancial experts agree that about

${\it Cystogen}$

Rapid and Effective Genito-Urinary Antisepsis

The pharmaco-therapeu-tic action of Cystogen and its compounds indicate its administration where rapid and effective genito-urinary antisepsis are desired without the fear of any untoward action. The principal features of Cystogen medication are:

- It causes the urine to be-come a dilute solution of formaldehyde.
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- composition of urine.

 It makes fetid, ammoniacal and turbid urine clear, unodorous and unirritating.

 It tends to ease renal and 3.
- It tends to ease renal and vesical irritability and discomfort. Its administration as a pro
- phylactic prior to and fol-lowing genito-urinary in-strumentation or surgery. With ordinary dosage there are rarely ever any toxic or

irritating sequellae. Cystogen, particularly Cystogen-Lithia, is of value in urinary lithiasis, with or without infection.

The administration of Cystogen, and its compounds, is indicated in most non-tuberculous infections of the urinary system; i.e. Pyelitis, Cystitis, Urethritis, etc.

Your patient can secure CYSTOGEN only on your pre-scription, since Cystogen is advertised only to the profession.

CYSTOGEN	CHEMICAL CO.,
	Brooklyn, N. V.

Please send me a professional sam-ple of Cystogen and literature.

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Only the best on are good enough

WHILE the convenience and economy of the Gerber venence and economy of the Geroer Products are important to the physician inasmuch as they help insure the mainte-nance of the prescribed dietary regime— the Gerber Strained Vegetables have their only real justification in their technical superiority to feedings prepared without the advantages of the specialized Gerber equipment. The Gerber Prod-Gerber equipment. The Gerber Products conserve important vitamin value destroyed through oxidation in home preparation. These losses are reduced to a minimum by the Gerber process in which both cooking and straining operations are performed in sealed vessels from which oxygen is excluded. Vegetables quickly lose food values, too, as they lose their garden freshness. The Gerber Products are made from vege-tables grown in supervised gardens-picked at exactly the right state of ma-turity—and started on the Gerber cooki—and started on the Gerber cooking process while still crisp and fresh from the garden.

Many mothers who appreciate the convenience and economy of the Gerber Products need to be told that this conrioucis need to be told that this con-sideration is entirely secondary, and that the only real reason the products are prescribed is the superior food value they provide for the baby.

The Gerber leaflets described below, will gladly be supplied physicians, nurse, and teachers in whatever quantities may be défired. Just use

the coupon.



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DR. LILLIAN B. STORMS, Ph.D., DR. LILLIAN B. STORMS,
GERBER PRODUCTS DIVISION,
FREMONT CANNING CO., FREMONT, MICHIGAN.

Please send me material checked in the quantity indicated:

- "Baby's Vegetables and Some Notes on Mealtime Psychology" "Gerber's Strained Vegetables in Thera-
- peutic Diets"

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Name Address ME-15 Green Beans, Be



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the most foolish thing a man can do is to leave all of his insurance payable in one lump sum to his wife or children. The government's figures show that the average widow is able to hold it about seven years. Some lose it far sooner that that, while others hold on longer, but the average is short enough.

The proper way is to work out some plan of distribution which assures the widow and children of a continuous income regularly, without worry on their part for the responsibility of investing it.

There are two main ways of doing this. One is to elect an optional settlement plan named in each policy, whereby a fixed guaranteed income can be determined in advance, and the entire job of distribution handled by the Insurance company without cost.

The other is to leave the entire proceeds in trust with a trust

company, authorizing them to follow the plan you wish carried out. They charge 5% of the income for their service.

The advantages of the first method lie in its absolute guarantee of non-shrinkage of principal, certainty of a minimum fixed income, and distribution without cost for the service. The disadvantage is to be found in its rigidity—that is, whatever plan you elect, that must and will be followed to the letter, regardless of any unforeseen post-mortem emergencies.

The advantage of the Life Insurance Trust plan lies chiefly in its flexibility—that is, you can give the trustees reasonable discretionary powers to provide extra money for unforeseen postmortem emergencies. The disadvantages of this plan are the non-guarantee against loss of principal and the service charge for its administration.

Where the [TURN TO PAGE 144]

Danish Ointment

(TILDEN)

The approved 24-hour treatment for

SCABIES

Price per pound \$1.28 Per dozen 2-oz. jars \$3.00

A trial will convince you.

(Physician's sample free upon request)

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THE TILDEN COMPANY

Pharmaceutical Chemists since 1848

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When patients inquire about liniment

... consider ABSORBINE JR.

Any doctor will tell his patients that a safe and reliable liniment should be in every home medicine cabinet.

Just such a liniment is Absorbine Jr. For 40 years now, doctors have attested its safety, and patients have been thankful for its effectiveness in bringing quick relief for muscular soreness.

This is because Absorbine Jr. is an excellent, non-blistering rubefacient. Patients use it freely with massage. Absorbine Jr. is therefore especially helpful in stirring up sluggish circulation and relieving congestion in muscles.

Absorbine Jr. has other spe-

cific uses as a handy homewise remedy. Used full strength, and is antiseptic for treatment of many treatment of the minor cuts, burns, bruises, as from abrasions. Its efficacy as the check for "Athlete's Foot" has been demonstrated by labor elocatory and clinical tests.

We should like to have yo determine for yourself it worthiness as a medicine-che essential for every home. Mo we send you a sample?

All druggists sell Absorbit esers Jr.—\$1.25 a bottle. W. Farer Young, Inc., 207 Lyman Staley Springfield, Mass. In Canada lat I Lyman Building, Montreal.

ABSORBINE

for years has relieved sore muscles, muscular aches, bruises, burns, cuts, sprains, abrasions



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RE PINEOLEUM COMPANY, Dept. M. E., 52 West 15th St., New York, N. Y.

[FROM PAGE 141] amount of insurance is large enough, I suggest a combination of the two plans, putting half of it in a trust and the other half under one of the optional settlement plans. You then are assured of certain guaranteed results, come what may, and at the same time you have reasonable assurance that all post-mortem emergencies are likely to be met without hardship.

R. A. Swink.

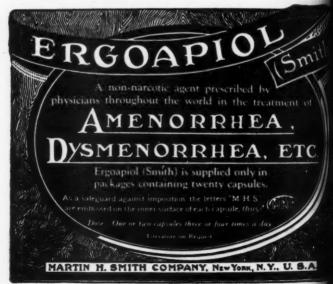
Contracts
To THE EDITOR:
The practices
of certain insurance companies
during recent years have resulted
in numerous complaints to the
national and local better business
bureaus, a surprising number of
them from physicians.

These complaints arise because the insured parties apparently do not understand the terms of the insurance contract which they sign, and because the contracts themselves give protection only in limited number of circumstances, so limited, in some casthat the contracts are practical worthless.

As to insurance contra which are not lived up to by o panies issuing them, we believe that here again the trouble caused by failure on the part the insured to interpret the or tracts correctly. In other wor the insured apparently believe that he is protected against contingencies, and then wh death or disability does occur. develops that the cause is due some other than the few specifi in the contract.

Concerning mail order instance policies, we call attention the fact that in most cases or panies cannot be forced to pay they are not licensed to do but ness. Most, if not all, of the surance companies doing busing on the mail order plan are allicensed in all states.

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